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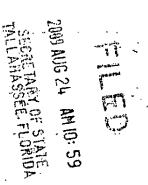
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)	 				
PICK-UP WAIT	MAIL				
(Business Entity Name)					
(Document Number)	-				
Certified Copies Certificates of Statu	s <u>. </u>				
Special Instructions to Filing Officer:					





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AUG 2 5 2009

EXAMINER

COVER LETTER

TO: Registration Division of	n Section Corporations					
SUBJECT:	CaSHI	P Homes LLC				
•	Name of Limi	ted Liability Company		-		
The enclosed Articles	s of Amendment and fee(s) are sub	omitted for filing.				
Please return all corre	espondence concerning this matter	to the following:				
		John C. Greer				
		Name of Person				
	C.A	.S.H. HOLDINGS, LL	С			
Firm/Company						
	1502	W. Fletcher Ave., Ste	113			
		Address				
		Tampa, FI 33612				
		City/State and Zip Code				
	JGI	JGBHH@tampabay.rr.com dress: (to be used for future annual report notification)				
		-	at nouncement	ANY C		
For further information	on concerning this matter, please of	zali:				
	John C. Greer	at (813)	240-3988			
Nar	me of Person	Area Code &	Daytime Telephone Numl	ber S	л 0	
Enclosed is a check f	or the following amount:					
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)}				Filing Fee, icate of Statu ied Copy ional copy is		
MAILING ADDRESS:		STREET/C	COURIER ADDRESS:	i.		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1,000,000,000	•	CaSHP Ho	omes LLC				
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviatio "LLC." Enter new principal offices address, if applicable: [Principal office address MUST BE A STREET ADDRESS] Enter new mailing address, if applicable: [Mailing address MAY BE A POST OFFICE BOX] B. If amending the registered agent and/or registered office address on our records, enter the name of the ner registered agent and/or the new registered office address here: Name of New Registered Agent: John C. Greer New Registered Office Address: I502 W. Fletcher Ave., Ste 113 Don C. Greer New Registered Office Address: I502 W. Fletcher Ave., Ste 113 Enter Florida street address Tampa Florida 33612 Florida 33612 Tampa Florida 33612 Tampa Florida 33612 Florida 33612 Tampa Florida 33612 Tampa	(Name of the Limited	Liability Compa Florida Limited I	ny as it now appea Liability Company)	rs on our recor	ds.)		
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Tampa, Fl 33612 Discussion of the new registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Tampa Florida 33612	1.0000000		were filed on	July 6, 20	009	_ and as	signed
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: John C. Greer New Registered Office Address: Tampa Florida 33612	This amendment is submitted to amend the folk	owing:					
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the ner registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1502 W. Fletcher Ave., Ste 113 Enter Florida street address Enter Florida street address Tampa Florida 33612	A. If amending name, enter the new name of	f the limited liab	oility company he	<u>re</u> :			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the ner registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1502 W. Fletcher Ave., Ste 113 Enter Florida street address Tampa Florida 33612		th the words "Lim	ited Liability Compa	any," the design	ation "LLC		abbreviation
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the ner registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1502 W. Fletcher Ave., Ste 113 Enter Florida street address Tampa Florida 33612	Enter new principal offices address, if applic	able:	1502 W. Flet	cher Ave., S	1 1	788	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the ner registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1502 W. Fletcher Ave., Ste 113 Enter Florida street address Tampa, Florida 33612	(Principal office address MUST BE A STREE	T ADDRESS)	Tampa, FI 33	3612		***	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Tampa, Fl 33612 B. If amending the registered agent and/or registered office address on our records, enter the name of the ner registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: 1502 W. Fletcher Ave., Ste 113 Enter Florida street address Tampa Florida 33612				·	- 63 F		Marine A.
Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: John C. Greer	Enter new mailing address, if applicable:		1502 W. Flet	cher Ave., S	m ch		*** 1.
Name of New Registered Agent: New Registered Office Address: 1502 W. Fletcher Ave., Ste 113	•			ORI DA	-	· · · · · · · · · · · · · · · · · · ·	
Folia	registered agent and/or the new registered of Name of New Registered Agent:	John C. Gr	eer etcher Ave., Ste	e 113	-		of the nev
Folia		Tamna		Fla	Florida 33612		12
			##· 				

New Registered Agent's Signature, if changing Registered Agent;

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent Signature of New Registered Agent

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action **Title** Name <u>Address</u> MGR C.A.S.H. HOLDINGS, LLC 1502 W. Fletcher Ave., Ste 113 ✓ Add ☐ Remove William Johnson MGR 105 Chestnut Court ☐ Add Royal Palm Beach, Fl 33411 ☐ Remove ☐ Add Remove Add Remove," FAdd 📆 Remove 5=4 D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) August 7 2009 Dated Signature of a member or authorized representative JOHN C. GREER Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00