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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Registration S Division of Co | ection rporations | | |
|-----------------------------------|--|--|--|
| SUBJECT: | Homestead Mana | agement and Associa | tes LLC. |
| | | ted Liability Company | · · · · · · · · · · · · · · · · · · · |
| The enclosed Articles of | f Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this matter | to the following: | |
| | | Paul Visser | |
| | | Name of Person | |
| | Homeste | ATD MAN AGEMENT AND Firm/Company | ASSOCIATES, LLC. |
| | | 1212 Lakebay Ct | |
| • | | Address | |
| | Winte | r Garden, FL 34787-464 | 8 |
| | | City/State and Zip Code | - |
| | p\ | visser98@yahoo.com to be used for future annual report n | otification) |
| | | | mication |
| For further information | concerning this matter, please c | :air: , | |
| | Paul Visser | at (407) | 963-7083 |
| Name | of Person | Area Code & Day | time Telephone Number |
| Enclosed is a check for | the following amount: | | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclo | Sed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIVISION OF CORPORATION OF JUL 29 PM 12: 2

Homestead Management and Associates, LLC.

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

| The Articles of Organization for this Limited Liab | ility Company were filed on | 07/24/2009 | and assigned |
|---|----------------------------------|-----------------------------|-------------------------|
| Florida document numberL090007173 | | | wild ususgifus |
| This amendment is submitted to amend the follow | ring: | | |
| A. If amending name, enter the new name of the | ne limited liability company he | <u>re</u> : | |
| Homestea | ad Management Central, L | LC. | |
| The new name must be distinguishable and end with t "L.L.C." | he words "Limited Liability Comp | any," the designation "L | LC" or the abbreviation |
| Enter new principal offices address, if applicab | le: | | |
| (Principal office address MUST BE A STREET | ADDRESS) | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BC | <u> </u> | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: | | our records, <u>enter t</u> | he name of the new |
| New Registered Office Address: | | | |
| | E | nter Florida street add | ress |
| | | , Florida | |
| | City | | Zip Code |

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

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 = ! | MGRM = Managing Member | | | | | |
|--------------|-------------------------------|---|----------------|--|--|--|
| <u>Title</u> | <u>Name</u> | Address | Type of Action | | | |
| | | | Add | | | |
| | | | Remove | | | |
| | | | Add Remove | | | |
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| | - | | Add Remove | | | |
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| | | | Remove | | | |
| | | | Add Remove | | | |
| | | | Add Remove | | | |
| D. If amen | ding any other information, e | enter change(s) here: (Attach additional sheets, if necessary.) | _ | | | |
| <u>L</u> | etter of consent from Hon | nestead Management Central, Inc. is attached | _ | | | |
| | | | | | | |
| | | | | | | |
| Dated | 28th July | | | | | |
| | | Paul Vis | | | | |
| | Signature | of a member or authorized representative of a member | | | | |
| | | Paul Visser Typed or printed name of signee | | | | |

Page 2 of 2

Filing Fee: \$25.00

Homestead Management Central, Inc. Owner 9021 Murano Mews Court Kissimmee, FL 34787

Attention: Brenda Tadlock

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

I Joanne Allen am an officer of Homestead Management Central, Inc. (EIN: 59-3625596) and herby authorize Homestead Management and Associates, LLC (EIN: 27-0616508) to change their name to Homestead Management Central, LLC

Sincerely,

Joanne Allen

President