109000/045/8

(Re	equestor's Name)		
(Ad	ddress)		
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(Ci	ity/State/Zip/Phone	#)	
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D. BRUCE

JUN 20 2011

EXAMINER

COVER LETTER

10:	Division of Corp						
SUBJE	СТ:		art LLC, 2010				
		Name of Limite	ed Liability Company				
The end	closed Articles of	Amendment and fee(s) are subr	nitted for filing.				
Please	return all correspon	ndence concerning this matter t	o the following:				
			Dana Hizkiya				
			Name of Person				
		Н	omemart 2010, LLC				
			Firm/Company				
		405 NORTH PINE ISLAND ROAD 105D					
			Address		neen g		
		PLANTATION FL 33324				8637 S 5881	
			City/State and Zip Code		17. T.		
		E-mail address: (to	eh747@gmail.com be used for future annual report	notification)	SSE	mil	
For fur	ther information co	oncerning this matter, please ca	ıll:	·	er si		C.
	Da	ana Hizkiya	at (_954_)	708-0026		<u>(39</u>	
	Name o	-		aytime Telephone Number	<u></u>		
Enclose	ed is a check for th	ne following amount:					
₹ 25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certified	te of Stati		sed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section in of Corporations ox 6327 assee, FL 32314	Registration S Division of C Clifton Build	orporations ing ve Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Homemart (Name of the Limited Liability Compa (A Florida Limited I	2010, LLC <u>ny as it now appears on our record</u> Jiability Company)	<u>is.</u>)		
The Articles of Organization for this Limited Liability Company Florida document number L09000104518	were filed on Oct. 28th 2	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and end with the words "Lim" "L.L.C."	ited Liability Company," the designa	ation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	962 SW 93rd Terrace			
(Principal office address MUST BE A STREET ADDRESS)	Plantation, FL 33324	Property with		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		ASSEC. FIGH		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>e</u> :	enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, 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 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 = Mana MGRM = Ma	ger naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Shlomo Dalal	962 SW 93rd Terrace PLANTATION FL 33324	☑ Add Remove
<u>MGR</u>	Meir Elazar	962 SW 93rd Terrace PLANTATION FL 33324	✓ Add □ Remove
			Add Remove
	· ————————————————————————————————————		Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		SS	
Dated	.,		
-	DANA	authorized representative of a member HIZLITA r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00