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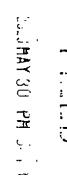
| (Requestor's Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

Registration Section

TO:

| ı of Corp | porations | • | |
|--------------------------|--|--|---|
| Devco ł | lomes, LLC | | |
| | Name of Lim | ited Liability Company | |
| | | | |
| icles of a | Amendment and fee(s) are sub | mitted for filing. | |
| correspoi | ndence concerning this matter | to the following: | |
| | Steven J Vainder | | |
| | | Name of Person | |
| | CC Homes | | |
| | | Firm/Company | ······ |
| | 2020 Salzedo Street, Suite | | |
| | | Address | |
| | Coral Gables, FL 33134 | | |
| | | City/State and Zip Code | |
| | = | to be used for future annual convert | vi Cantinu) |
| nation co | | | arrearon, |
| | | 786 364-5421 | |
| Name of | Person | | me Telephone Number |
| ck for th | e following amount: | | |
| g Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | Street Address: Registration S | ection |
| Division of Corporations | | Division of Corporations | |
| | | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | |
| | nation ed Name of Keep Station Stati | Steven J Vainder CC Homes 2020 Salzedo Street, Suite Coral Gables, FL 33134 LViera@echomes.com E-mail address: (in the following amount: Steven J Vainder Coral Gables of Street, Suite Coral Gables of Street, Suite Coral Gables of Street, Suite E-mail address: (in the following amount: Steven J Vainder Coral Gables of Street, Suite Coral Gables of Street, Su | Name of Limited Liability Company icles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: Steven J Vainder |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| (Name of the Limited Liability (A Florida | ity Company as it now appears on our records. a Limited Liability Company) |) |
|--|--|--|
| (A TOMO | · Emined Elability Company) | |
| The Articles of Organization for this Limited Liability C | Company were filed on 01/07/2010 | and assigned |
| Florida document number L10000002302 | · | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limi | ited liability company here: | |
| CC Devco Acquisitions, LLC | | |
| The new name must be distinguishable and contain the words "Lim | ited Liability Company," the designation "LLC" | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDR | RESS) | |
| | | , |
| | | |
| Enter new mailing address, if applicable: | | 73 · · · · · · · · · · · · · · · · · · · |
| • | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | d office address on our records, <u>enter tl</u> | he name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | | |
| | Flor | rida |

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|------------------|---------------|------------------------|-------------------|
| VP Rafael Romero | Rafael Romero | 2020 Salzedo Street | |
| | | 5th Floor | ■Remove |
| | | Coral Gables, FL 33134 | □Change |
| | | | |
| | | Remove | |
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| | | | \ \tag{\tag{Add}} |
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| (If an effe <u>Note:</u> I | re date, if other than the date of filing: (optional) ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(to the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records. |
| f the record ecord is file | specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d. |
| Dated _ | May 25 2023 |
| | Signature of a member or authorized representative of a member |
| | Steven J Vainder |
| | Typed or printed name of signee |

. . . .

Filing Fee: \$25.00