

#L100000016243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100244077011

02/07/13--01020--013 **25.00

FILED
13 FEB 19 PM 4:28
CLERK OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
FEB 20 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2013

HOME BUYER HELPER, LLC
ADA E SANCHEZ
1550 ELF STONE DR.
CASSELBERRY, FL 32707

SUBJECT: HOME BUYER HELPER, LLC
Ref. Number: L10000016243

We have received your document for HOME BUYER HELPER, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted is incomplete. Enclosed are the two missing pages for your convenience. Please complete where needed and sign the last page. Return these pages back to our office for filing along with a copy of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 313A00003180

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **HOME BUYER HELPER LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ADA E SANCHEZ

Name of Person

HOME BUYER HELPER REAL ESTATE, LLC

Firm/Company

1550 ELF STONE DRIVE

Address

CASSELBERRY, FL 32707

City/State and Zip Code

ADA0425@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADA E SANCHEZ

Name of Person

at **407 342-2664**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

HOME BUYER HELPER LLC

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

FILED
13 FEB 19 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02-11-2010 and assigned
Florida document number L10000016243.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

HOME BUYER HELPER REAL ESTATE, LLC

The new name must be distinguishable and end with the words "Limited 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 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:

Enter Florida street address

City, 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 = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR/member/owner	Adn E Sanchez		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
MGR	Maria D DIAZ		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

same no chg in address

same no chg in address

Please modify per DBPR

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated

2/15, 2003

Ada Elsie Sanchez

Signature of a member or authorized representative of a member

Ada Elsie Sanchez

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00