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D. BRUCE
MAY 27 2011
EXAMINER

COVER LETTER

TO: Registration S Division of Co	Section orporations		
SUBJECT:	Cedar T	ree Homes LLC	
	· · · · · · · · · · · · · · · · · · ·	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matte	r to the following:	ī
		Nicole Taha	
		Name of Person	w5.
			The grant and
		Firm/Company	
		1423 Greenbriar Dr	ES
		Address	26 PH III
		Allan Taura 75040	PH III
		Allen Texas 75013 City/State and Zip Code	
	nie	•	*
	E-mail address: (ckfarhood@gmail.com to be used for future annual report not	ification)
For further information	concerning this matter, please of	call:	
1	Nicole Taha	at (_469)	360 8634
Name	of Person		me Telephone Number
Enclosed is a check for	the following amount:	2*	
₹25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	Section 1 Section 1 Section 2 Sectio
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COUR Registration Secti	HER ADDRESS:
		Division of Corpo Clifton Building	
		2661 Executive C	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Cedar Tree Homes LLC		
(<u>Nan</u>	e of the Limited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization fo	r this Limited Liability Company were filed on	04/01/2010	and assigned
Florida document number	L10000037811		
This amendment is submitted to	amend the following:		
A. If amending name, <u>enter t</u>	he new name of the limited liability company he	ere:	
The new name must be distinguis "L.L.C."	hable and end with the words "Limited Liability Comp	pany," the designation	"LLC" or the abbreviation
Enter new principal offices ad	dress, if applicable:		D
(Principal office address MUS	T BE A STREET ADDRESS)		ASS N
Enter new mailing address, if Mailing address MAY BE A F	* *		PH 1: 11
	ed agent and/or registered office address on w registered office address here:	our records, enter	the name of the nev
	· · · · · · · · · · · · · · · · · · ·		
Name of New Registe	red Agent:		
New Registered Office		nter Florida street aa	ldress
		. Florida	
	City	, FIOTIGE	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>	Name	Address	Type of Action
MGRM	Nicholas Farhood	5 Calhoun Ave #605 Destin, FL 32541	Add ✓ Remove
MGR	Nicholas Farhood	5 Calhoun Ave #605 Destin, FL 32541	✓ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
·····	<u> </u>		Add Remove
D. If ame	ending any other information, enter Changing from a Member ma	er change(s) here: (Attach additional sheets, if neces.	THAY 26 PM II: II
Dated	May 14	2011.	
	Signature of a	a member or authorized representative of a member	
		Nicole Taha Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00