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	gistration Sec vision of Corp				
CHD IPCT.		CH HOUSE, LLC			
SUBJECT:		Name of Lim	ited Liability Company		-
The enclosed	d Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return	ı all correspon	dence concerning this matter	to the following:		
		THOMAS W. WALTERS	i		
		-	Name of Person		_
		THOMAS W. WALTERS	s, P.A.		
			Fim/Company		_
		499 E. Palmetto Park Roac	d, Suite 209		
			Address		
		Boca Raton, FL 33432			
			City/State and Zip Code		
		twwlaw1@gmail.com			_
		E-mail address: (to be used for future annual re	eport notification)	
For further in	nformation con	ncerning this matter, please ca	all:		
THOMAS V	V. WALTERS		561 876- at ()	-6770	
	Name of I	³ erson	Area Code	Daytime Telephone Num	iber
Enclosed is a	n check for the	following amount:			
國 \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certif (sed) Certif	Filing Fee, ficate of Status & fied Copy onal copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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

BOCA BEACH HOUSE, 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 Liability Company were filed on APRIL 11, 2011 and assigned
Florida document number L11000044178
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
DeSantis Hoffman LLC The new name must be distinguishable and four the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: 903 E - Boca Raten Road
(Principal office address MUST BE A STREET ADDRESS) DOCA Raton FL 33432
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: Diane Do Santis Hoffman
New Registered Office Address: 902 E. Baca Raton Road Enter Florida street address
Boxa Raton, Florida 33432

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 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

Page 1 of 3

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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 = N AMBR = A	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00

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