## L11000124978

(Requestor's Name)
(Āddress)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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SEP 22 2014 N. CAUSSEAUX

O: Registration Section Division of Corporations
SUBJECT: Homes Made Possible 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:
RYAN FUNK
Name of Person
Firm/Company
intri/Company
2207 SW 13th AVE
Address
CADE CORAL FL 33991
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
CADE CORAL FL 33991  City/State and Zip Code  1 YAN FUNK PM C COMA: 1. COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Prau Funk au 239, 595-2546
Name of Person . Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed)  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



September 8, 2014

RYAN A. FUNK 2207 S.W. 13TH AVENUE CAPE CORAL, FL 33991

SUBJECT: HOMES MADE POSSIBLE LLC NAME CHANGE TO ZEPHYR

REALTY, LLC

Ref. Number: L11000124978

We have received your document for HOMES MADE POSSIBLE LLC NAME CHANGE TO ZEPHYR REALTY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

You sent the amendment form for a corporation not an LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux Regulatory Specialist II Supervisor

Letter Number: 014A00019094

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Homes Mase ?	Possible LLC	•
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our record	<u>s.</u> )
	· · · · · ·	型袋 无
The Articles of Organization for this Limited Liability Company	were filed on $ O u 201$	Z and assigned
Florida document number <u> </u>		22
This amendment is submitted to amend the following:		25
A. If amending name, enter the new name of the limited liabi	lity company here:	2: <b>0</b>
ZEPHYR REALTY LLC		18 H
The new name must be distinguishable and end with the words "Limited Liabi	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		· 6x
(Principal office address MUST BE A STREET ADDRESS)	2207 SW	13th AUB
Trincipus office musicss in our Barris I Mala Traballess	CADE COEA	
	CAPE COO	70, 10 03/11
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	2207 SW	131- AUE
mutang undress MAT BE A FOST OF FICE BOX	CADE CORAL	
	CADE COME	- 1 1 2 33/11
B. If amending the registered agent and/or registered of	ice address on our records	s, 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 addres	s
	, Flo	orida
<del>- "</del>	City	Zip Code
$\underline{\textbf{New Registered Agent's Signature, if changing Registered Agent:}}$		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, ar rovided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is
company has been notified in writing of this change.		

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	KANE, Michael	11 Sunset Drive 805	
		SAMSORA, FL 39	1236
			Add
			□ Remove
M/aPM	FUNK / insan	2207 SW 13th AUE	
<u> </u>	7002, 2,005	Cast Card (	Add
		CAPE COTAL FL 33991	□ Remove
			□ Add
			□ Remove
			Add
			□ Remove
			_ <del></del>
			Add
			Remove

<del></del>	
Affective date, if other than the date of filing:	(optional)
Effective date, if other than the date of filing:  The effective date must be specific, cannot be prior to date of receipt or filed date and the date this document is filed by the Florida Department of State)	(optional) I cannot be more than 90 days after
the date this document is filed by the Florida Department of State)	(optional)
the date this document is filed by the Florida Department of State)	(optional)
the date this document is filed by the Florida Department of State)	(optional)
the date this document is filed by the Florida Department of State)	(optional)
the date this document is filed by the Florida Department of State)	B
Dated 9-16, 2014.	B

Page 3 of 3

Filing Fee: \$25.00

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