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COVER LETTER

TO: Registration Section.
Division of Corporations

The New Home Star Florida Management 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:

Raymond Reinhardt		
Name of Person		
New Home Star		
Firm/Company		
500 N Michigan Avenue, Ste 600		
Address		
Chicago, IL 60613-3754		
City/State and Zip Code		
operations@newhomestar.com		

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

For further information concerning this matter, please call:

Raymond Reinhardt

,312、813-8579

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing 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)

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**

New Home Star Florida Managment 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 01/05/12	and assigned
Florida document number L1200002074		الأنامين
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	Service Constitution of the Constitution of th
and the manual manual of the ministed man	mty company note.	22:
The new name must be distinguishable and end with the words "Limited Liab	pility Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		差で
(Principal office address MUST BE A STREET ADDRESS)		
		
		
	500 N MIOLUO AN AVE	- OTE 000
Enter new mailing address, if applicable:	500 N MICHIGAN AVE	
(Mailing address MAY BE A POST OFFICE BOX)	CHICAGO IL 60611-37	754
		,
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		nter the name of the new
New Registered Office Address:		
	Enter Florida street address	
	Til a utid	1
	City , riorid	laZip Code
New Registered Agent's Signature, if changing Registered Agent:	•	•
I hereby accept the appointment as registered agent and agr 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 company has been notified in writing of this change.	ee to act in this capacity. I furthe performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and . Or, if this document is
If Cha:	nging Registered Agent, Signature of N	ew Registered Agent

If ameading the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager, AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	David Bonnsman	553 Cardinal Oaks Court	= Add
		Lake Mary, FL 32746	□ Remove
MGR	Curt Roese	37 North Orange Avenue	□ Add
		Orlando, FL 32801	■ Remove
		, p	□ Add
			Add
			□ Rémove
		,	Remove
			Add
			☐ Remove

cetive date, if other than the date of filing: effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after date this document is filed by the Florida Department of State) 2014	,	
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30	•	•
Asignature of a member or authorized representative of a member	Stenature of a r	member or authorized representative of a member
David M. Rice		

Page 3 of 3

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Filing Fee: \$25.00