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# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Ark Home Ventures 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:	
Carro Thomas Name of Person	
Ark Home Ventures, LLC Firm/Company	
1700 N. Monroe St. STE 11-198	
Tallahassec Ft 32303 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Carro Thomas at (850) 524-6016  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
▼ \$25.00 Filing Fee	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited L	, , ,
The Articles of Organization for this Limited Liability Company of Florida document number	APR 20 THE
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1700 N. Monroe Sh STE 11-198 Tallahassee, FL 32303
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1700 N. Monroc St. STE. 11-198 Talla hassee, FC 32303
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:  New Registered Office Address:  Talla	Same  1. Monoc St STE 11-198  Enter Florida street address  ASSee Florida 32-36-3  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 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

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
				 □Add
				 Remove
	_			 □Change
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			/	 □Remove
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# D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be phor to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Signature of a member or authorized representative of a member

Typed or printed name of signee