L120000 52764

(Re	equestor's Name)			
(Address)				
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	: #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
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600234277966

05/02/12--01018--033 **25.00

JUL 6 2012 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: JAMPA HOME BUTERS 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:						
JUAN HARTSFIED Name of Person						
TAMPA HOME BUTERS LLC Firm/Company						
1005 W. BUSCH BUD. SUTE 204						
TAMPA FC. 33 (12-7700) City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Person at (813) 990-738 Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certificate of Status 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



May 3, 2012

JUAN HARTSFIELD 1005 W BUSCH BLVD TAMPA, FL 33612

SUBJECT: TAMPA HOME BUYERS LLC

Ref. Number: L12000052764

We have received your document for TAMPA HOME BUYERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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.

Letter Number: 612A00013378

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

RECEIVED

11 JUN 13 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 23, 2012

JUAN HARTSFIELD 1005 W BUSCH BLVD TAMPA, FL 33612

SUBJECT: TAMPA HOME BUYERS LLC

Ref. Number: L12000052764

We have received your document for TAMPA HOME BUYERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return the corrected original and one copy of 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.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 612A00015098



RECEIVED

12 JUL -3 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

June 14, 2012

JUAN HARTFIELD 1005 W BUSCH BLVD STE 204 TAMPA, FL 33612-7700

SUBJECT: TAMPA HOME BUYERS LLC

Ref. Number: L12000052764

We have received your document for TAMPA HOME BUYERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

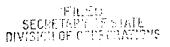
Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 312A00016714

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Name of the Limited Liability Compa	RS LLC	12 JUL -3 PM 1:56	
(A Florida Limited I	Liability Company)	our records.	
The Articles of Organization for this Limited Liability Company Florida document number <u>L.1.200052161</u> .	were filed on APRIC	18, 2012 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company,"	the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	1005 W. B	WCH BLUD SUTE 2014	
(Principal office address MUST BE A STREET ADDRESS)	JAMPA, FO	. 33612	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1005 W. _SUTE 20 TAMPA, F	BUSCH BUD DH L. BCIZ	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
 	Enter Florida street address		
		, Florida	
	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 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 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>	<u>Name</u>	<u>Address</u>	Type of Action
			_□ Add _□ Remove
			
			_□ Add _□ Remove
			Add Remove
			□ Add _□ Remove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	_
			SECRETA DIVISION OF 12 JUL –
Dated	Signofura of a morth	et a authorized representative of a member	3 PH 1:56
•		ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00