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PICK-UP WAIT MAIL
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# COVER LETTER,

ro: Registration Se Division of Cor			*	
SUBJECT:	Pop's How	اجو لـلـ		
30 <b>2</b> 3 13 0 1 .	Name of Lim	SE LLC ited Liability Company		
	Amendment and fee(s) are sub-			
Please return an correspo	ndence concerning this matter	to the following.		
	Noelia	Chahalis Name of Person		
	707'5	House LLC Firm/Company		
	1001 E	Sample Re Address	<u> </u>	
	noe(ioco E-mail address: (	Beach FL City/State and Zip Code  NorthStariop  to be used for future annual	report notification)	
For further information c	oncerning this matter, please ca	all:		
Nælia Cha	whalis f Person	at (964 )	876 1120 Daytime Telephone Number	
Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed is a check for the	ne following amount:			
<b>反</b> \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enc	Certificate ( losed) Certified Co	of Status &

### 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

## TO ARTICLES OF ORGANIZATION OF

<u></u>	House LLC		
(Name of the Limited) (A	iability Company as it now appea lorida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liab		5/23/12	and assigned
This amendment is submitted to amend the follow			
A. If amending name, enter the new name of th	e limited liability company h	<u>iere</u> :	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the	designation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicab	e:		
Principal office address MUST BE A STREET	ADDRESS)	And Fr. F	<del>.,</del>
		<b>*</b>	
		200 - 100 cm - 5 200 cm - 5	
Enter new mailing address, if applicable:			3
<u>Mailing address MAY BE A POST OFFICE BC</u>	<u>X)</u>		
		مبيلا ليار	<u>,                                    </u>
	), 1 AM 13	7>- \	<b>у</b> Л
B. If amending the registered agent and/or registered agent and/or the new registered office		n our records, enter	the name of the r
Name of New Registered Agent:	Michael Chahi		
New Registered Office Address:	1661 E Sam Enter Flo	Ple Rd orida street address	
	Rongono Bear	_ Florida	33064
	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

Page 1 of 3

# or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Registered	Name Edgardo Vega	1661 E Sample Rd Paupano Beach FL 33064	□ Add
Agen		Paulano Death FL 330/64	Remove
			Change
			Add
		****	□ Remove
			Change
			□ Add
		~ ~ ~	□ Remove
		2015 HAY 20	Change
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Effective date, if other than the date of filing: 51415  (If an effective date is listed, the date must be specific and cumon be prior to date of filing or more than 90 days afferding phresuant to 605.0207  Made: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 by The 90th day after the record is filed.  Dated May 14  Signature of Emember Assumborized appresentative of a member  Michael Changles			
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Effective date, if other than the date of filing:		775 <b>- 171</b>	
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the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of ). The 90th day after the record is filed.  Dated	Effective date, if other than the date of filing: 5/14/15	(optional)	
Dated	Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	of filing requirements, this date will not be liste	ed as th
Signature of a member of a member of a member Michael Chahalis	the record specifies a delayed effective date, but not an effecti ) The 90th day after the record is filed.	ive time, at 12:01 a.m. on the earlie	er of:
Michael Chahalis	Dated May 14 , 2015		
Michael Chahalis	Signature of a member of authorized tepresen	tative of a member	
$\mathbf{r}_{-}$	Michael Chahalis Typed or printed name of sign		

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Filing Fee: \$25.00