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> JUL 1 5 2013 J. BRYAN

COVER LETTER

' TO:

Registration Section
Division of Corporations

Local Home Investments 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:

Chris Doll

Name of Person

Firm/Company

8710 West Hillsborough 243

Address

Tampa/Fl 33615

City/State and Zip Code

chrisidoll@gmail.com

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

For further information concerning this matter, please call:

Chris Doll

_{....}813、**3137077**

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

Local Home Investments LLC

company has been notified in writing of this change.

(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 Lia	ability Company were filed or	2/17/13 and assigned		
Florida document number L13000024981		TASE S		
rortea document number	 •	y here:		
	•	影らり		
This amendment is submitted to amend the follo	wing:	SSS		
A. If amending name, enter the new name of	the limited liability compan	y here:		
		Tost.		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability C	Company," the designation "LLC" or the appreviation		
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE E	<u></u>			
R If amending the registered agent and/o	r registered office address	on our records, enter the name of the new		
registered agent and/or the new registered off		on our records, enter the name of the new		
Name of New Registered Agent:	Thomas Bell			
	2795 Payaida Driva	South		
New Registered Office Address:	2785 Bayside Drive South Enter Florida street address			
	0.5.			
	St. Petersburg	Florida 33705		
	City	Zip Code		
New Registered Agent's Signature, if changing R	egistered Agent:			
Therefore and the sure interests and a second	d d d d d	1.: 1.C 1.C		
I hereby accept the appointment as registered the provisions of all statutes relative to the pr		nis capacity. I juriner agree to comply with ance of my duties, and I am familiar with and		
accept the obligations of my position as regis	tered agent as provided for	in Chapter 608, F.S. Or, if this document is		
being filed to merely reflect a change in the r	egistered office address, I h	ereby confirm that the limited liability		

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

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> **Address Type of Action Chris Doll** 2785 Bayside Drive South **MGRM** St. Petersburg, Fl, 33705 Add Remove Remove

ending any other miorination, en	ter change(s) here: (Attach additional sheets, if nec	essui y.)
		
		
- 1 00	_,·	
Christall Christ		
-	f a member or authorized representative of a member	
Chris Doll		
	Typed or printed name of signee	4.0
	Dogo 2 of 2	200

Page 3 of 3

Filing Fee: \$25.00

