1300088687

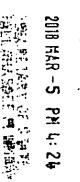
| (Requ | estor's Name) | <u> </u> |
|-----------------------------|-----------------|-------------|
| (Addr | ess) | |
| (Addr | ess) | |
| (City/S | State/Zip/Phon | e #) |
| PICK-UP | MAIT | MAIL |
| (Busin | ness Entity Nar | me) |
| (Docu | ıment Number) |) |
| Certified Copies | Certificate | s of Status |
| Special Instructions to Fil | ling Officer: | |
| | | |
| | | |
| | | , |

Office Use Only



400309025444

02/15/18--01010--005 **25.00



WROS PER RIE

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | | 2018 K-18. |
|---|--|--|---|--|-------------------|------------|
| BAY AREA HOMES, LLC | | | | | | ÷5 |
| SUBJEC | CT: | Name of Lim | ited Liability Company | | | -5 |
| | | | | | | F.H. |
| The encl | losed Articles of | Amendment and fee(s) are sub | mitted for filing. | | Artesta Long | 8: 23 |
| Please re | eturn all correspo | ondence concerning this matter | to the following: | | | డు |
| | | HARISH L PATEL | | | | |
| | | | Name of Person | | | |
| | | BAY AREA HOMES LLO | ;; | | | |
| Firm/Company | | | | | | |
| | 7827 N DALE MABRY HWY SUITE 102 | | | | | |
| | | | Address | | | |
| | | TAMPA _J FL 33614 | | | | |
| | | | City/State and Zip Code | | | |
| | PATELITIOS@GMAIL.COM E-mail address: (to be used for future annual report notification) | | | | | |
| For furth | ner information c | oncerning this matter, please c | | , | | |
| | H L PATEL | the matter predict | 813 459-9122 | | | |
| | | f Person | at () | Telephone Number | | |
| | Name o | e i cison | Area Code Dayone | retejatorie (viintoe) | | |
| Enclosed | d is a check for the | ne following amount: | | | | |
| 2 \$25. | .00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Certificate of Certified Contadditional cop | of Status & py | |
| | Registr Divisio P.O. Bo | ING ADDRESS: ration Section on of Corporations ox 6327 assec. FL 32314 | STREET/COURD Registration Section Division of Corpora Clifton Building 2661 Executive Cor | n ations | | |

Tallahassee, FL 32301



February 19, 2018

HARISH L PATEL 7827 N DALE MABRY HWY SUITE 102 TAMPA, FL 33614

SUBJECT: BAY AREA HOMES, LLC

Ref. Number: L13000088687

We have received your document for BAY AREA HOMES, 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):

Part 5(a) and 5(b) has not been completed.

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 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: 918A00003440

Jenna D Harris Regulatory Specialist II



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| BAY AREA HOMES LLC | | |
|---|---|------------------------------|
| (<u>Name of the Limited Liability Com</u> (A Florida Limited | pany as it now appears on our records I Liability Company) | _) |
| the Articles of Organization for this Limited Liability Compan | ny were filed on <u>06/19/2013</u> | and assigned |
| lorida document number L13000088687 | | |
| his amendment is submitted to amend the following: | | |
| . If amending name, enter the new name of the limited lia | bility company here: | |
| he new name must be distinguishable and contain the words "Limited Lial | bility Company," the designation "LLC" | or the abbreviation "L.L.C." |
| nter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET ADDRESS) | | |
| | | |
| | | TA AND INNE |
| nter new mailing address, if applicable: | | - 1 Orași |
| Muiling address MAY BE A POST OFFICE BOX) | | 101 - 10 ENT |
| | | |
| | | |
| 3. If amending the registered agent and/or registered | | , enterathe name of the no |
| egistered agent and/or the new registered office address he | <u>ere</u> : | |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| 711 | Flo | orida |
| | City | Zin 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 |
|--------------|-----------------|-----------------------------|----------------|
| MGR | PATEL, KEVIN II | 7827 N DALE MABRY HWY # 162 | D Add |
| | | TAMPA FL 33614 | ■ Remove |
| | | | Change |
| | | | |
| | | | □ Remove |
| | | | Change |
| | | | |
| | | | ☐ Remove |
| | | · *** | Change |
| | | | |
| | | | □ Remove |
| | | <u></u> | - Change |
| | | | Add |
| | | | Remove Remove |
| | | | Change |
| | | | □ Remove |
| | | | □ Change |

| Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (Arte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records. The 90th day after the record is filed. Dated 02/28/ 2018 HARISHL PATEL ANGR Typed or printed name of signec. | If amending any | other information, c | enter change | x(s) here: <i>(A</i> | uach additiona | l sheets, if neco | essary.) | | |
|--|---------------------|--------------------------|------------------|----------------------|--|--|--|------------------------|---------------------|
| Effective date, if other than the date of filing: | | | | | | | | | |
| Effective date, if other than the date of filing: | | | _ | | | | | | |
| Effective date, if other than the date of filing: | | | | | | | | | |
| Effective date, if other than the date of filing: | | | _ | | | | | | |
| Effective date, if other than the date of filing: | | | | | | | | | |
| Effective date, if other than the date of filing: | | | | | | | | | |
| Effective date, if other than the date of filing: | | | | | | | | | |
| Effective date, if other than the date of filing: | - | | _ | ···· | | | | - | |
| Effective date, if other than the date of filing: | | | | | | • | | | |
| Effective date, if other than the date of filing: | | | | | | | | | |
| Effective date, if other than the date of filing: | • | | | - | | | | | |
| Effective date, if other than the date of filing: | | | | | | | - | | |
| Effective date, if other than the date of filing: | | | | | s | . | | | |
| Effective date, if other than the date of filing: | | | | | | | | | |
| Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. 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 02/28/ 2018 HARISH L PATEL, AMGR | | | | | | | | | |
| Effective date, if other than the date of filing: (If an effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. 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 02/28/ 2018 HARISH L PATEL, AMGR | | | | | | | | | |
| Effective date, if other than the date of filing: (If an effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. 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 02/28/ 2018 HARISH L PATEL, AMGR | | | | | | | | | |
| Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. 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 02/28/ 2018 HARISH L PATEL, AMGR | | | | | | | | | |
| Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. 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 02/28/ 2018 HARISH L PATEL, AMGR | | | | | | | | | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as if document's effective date on the Department of State's records. 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 O2/28/ Signature of a member or authorized representative of a member HARISH I. PATEL, AMGR | | ·· | | | | | | | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as if document's effective date on the Department of State's records. 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 O2/28/ Signature of a member or authorized representative of a member HARISH I. PATEL, AMGR | | | | | | | | | |
| Dated | Note: If the date i | nserted in this block do | es not meet th | he applicable : | e of filing or more statutory filing re | (option than 90 days after equirements, this | onal) (filing.) Pursua s date will not | nt to 605. be liste | 0207 (3) d as th |
| HARISH L. PATEL, AMGR | | | | but not an | effective tim | e, at 12:01 a | a.m. on the | earlie | er of: |
| HARISH I. PATEL, AMGR | Dated | 02/ | 28/ 20 | 18 | | | | | |
| HARISH I. PATEL, AMGR | 1-7 | Hazin L | Pate | l | | | | | |
| HARISH L PATEL, AMGR | — ∀ | Signat | ture of a member | er or authorized | representative of | a member | 3 | 2018 | |
| Typed or printed name of signee | HARIS | H L PATEL, AMGR | | | | | <u>.</u> | | Taray . |
| | | | Туре | d or printed nar | ne of signee | | 25 ···· | | William. |
| | | | • • | • | - | | 2 | S | § ,2 |

Page 3 of 3

Filing Fee: \$25.00