

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000350349 3)))



H190003503493ABC1

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : LICENSES ETC INC  
Account Number : 120070000159  
Phone : (239)777-1028  
Fax Number : (877)275-3593

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Support@licensesetc.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
AFFINITY CUSTOM HOMES, LLC

Certificate of Status	1
Certified Copy	1
Page Count	09
Estimated Charge	\$60.00

850-617-6381

12/6/2019 12:44:26 PM PAGE 1/001 Fax Server



December 6, 2019

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

AFFINITY CUSTOM HOMES, LLC  
12801 COMMERCE LAKES DRIVE  
SUITE 25  
FORT MYERS, FL 33913

SUBJECT: AFFINITY CUSTOM HOMES, LLC  
REF: L13000119205

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The conflict is L19000191753.

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) 245-6050.

Tracy L Lemieux  
Regulatory Specialist II

FAX Aud. #: H19000350349  
Letter Number: 219A00024764

((H19000350349 3)))

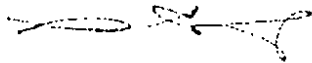
Florida Department of State  
Division of Corporations, Corporate Filings  
PO Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Please accept this letter as authorization for the business name Affinity Building Group LLC to be released to myself, Larry A. Schoof. The original company name with Document # L19000191753 has recently filed for dissolution. With the attached amendment for Affinity Custom Homes, LLC, I wish to change the business name from Affinity Custom Homes, LLC to Affinity Building Group LLC. With my signature below, I authorize the name Affinity Building Group LLC to be released for use.

This should be everything that you will need in order to successfully release the name for my use. If you have any additional questions, please contact my associate Lisa Adams at (239) 777-8321.

Thank you for your assistance,



Larry A. Schoof

((H19000350349 3)))



ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2019 DEC 12 P 12:54

AFFINITY CUSTOM HOMES, LLC

(Name of the Limited Liability Company as it now appears on our records): TALLAHASSEE, FLORIDA  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/22/2013 and assigned  
Florida document number L13000119205.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

AFFINITY BUILDING GROUP LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

27 CRESTWOOD CIR S

LEHIGH ACRES, FL 33936

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

27 CRESTWOOD CIR S

LEHIGH ACRES, FL 33936

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

LARRY A. SCHOOFF JR.

New Registered Office Address:

27 CRESTWOOD CIR S

Enter Florida street address

LEHIGH ACRES

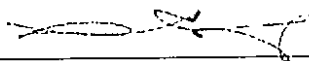
City

Florida 33936

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

(((H19000350349 3)))

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	LARRY SCHOOOF	27 CRESTWOOD CIR S	<input checked="" type="checkbox"/> Add
		LEHIGH ACRES, FL 33936	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	RACHEAL SCHOOOF	27 CRESTWOOD CIR S	<input checked="" type="checkbox"/> Add
		LEHIGH ACRES, FL 33936	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JAMES P. HOLDEN	25088 Palisade Rd	<input checked="" type="checkbox"/> Add
		Punta Gorda, FL 33983	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

(((H19000350349 3)))

