

213000 136921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

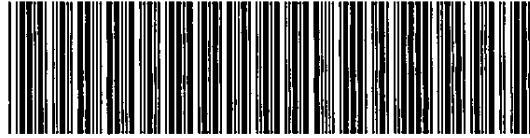
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

DEC 02 2015
J SHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HOMESTEAD 15 SRO 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:

AMANDA MAYAN
Name of Person
HOMESTEAD 15 SRO LLC
Firm/Company
4561 Sheridan Street, Suite 200
Address
Hollywood, FL 33021
City/State and Zip Code
katiainvestments@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amanda Mayan at (305) 205-0745
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**

HOMESTEAD 15 SRO LLC

(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 Liability Company were filed on 9/27/2013 and assigned Florida document number L13000136921.

This amendment is submitted to amend the following:

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

(N/A)

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:

4559 SW 33rd Avenue

(Principal office address MUST BE A STREET ADDRESS)

Fort Lauderdale, Florida 33312

Enter new mailing address, if applicable:

4559 SW 33rd Avenue

(Mailing address MAY BE A POST OFFICE BOX)

Fort Lauderdale, Florida 33312

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:

Katia Meza

New Registered Office Address:

4559 SW 33rd Avenue

Enter Florida street address

Fort Lauderdale

, Florida

City

33312
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

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>
MGR	Amanda Mayan	4561 Sheridan St, Ste 200, Hollywood, FL 33021	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Onyx Group LLC (Doc. #L14000096178)	4559 SW 33rd Ave, Ft Lauderdale FL 33312	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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