117000 147014

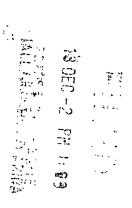
(Requestor's Name)
(Address)
(Address)
(Hadicas)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Scanisco Linis, Marie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300254228633

12/02/13--01042--015 **25.00



T' Styles DEC 0 3 5013

COVER LETTER

то:	Registration Sect Division of Corp			
SURIE	cr. /	My Home AL	F. 668	
301312	CI			
The end	losed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspon	dence concerning this matter	to the following:	
		MICHALL	WALLERS	
			Name of Person	······································
		MY How	IE ALF. LLC	
			Firm/Company	
		290 NW	144 4	
			Address	
		1 ,	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
City/State and Zip Code MIKEBW. 1 @ MITTERD. NET E-mail address: (to be used for future annual report notification)				
Б.С.	1 10 3			ony
	1	•		
1	ILLUAEL 1	JALTERS	306, 411-49	44
SUBJECT: 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: Alt Alt LL Firm/Company				
Enclose	d is a check for the	following amount:		
\$25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

My Home A	LF, LLC	
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears o Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability (ィス - 2013 and assigned
Florida document number	L .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Company,	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
		The second secon
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter	Florida street address
	City	, Florida 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 608, 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
PREG/L	MARK MICHAEL WALTERS	290 NW 188 ST	Add
		MIAMI GARBENS, FL 33169	Remove
Mur	EMILY WALTERS	16 BROOKAN AVE	
		ROUSEVELT, NY 11575	Remove
			Add
			Remove
		500 500 600 600 600 600 600 600 600 600	0.23
			Remove
			Add
			Remove
			Remove

Dated)
Pated 11-28 , 20/3	
ated 11-28, 20/3.	—
ated 11-28, 20/3	
ated $11-28$, $20/3$	
M. No 6	
Signature of a member or authorized representative of a member	
Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00