Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM, COM INC.

Account Number : I20010000062

Phone : (323)962-8600

: (323)962-3889

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **HEMINGWAY HOMES LLC**

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Electronic Filing Menu Corporate Filing Menu Filing Menu

COVER LETTER

	egistration Se ivision of Co			
STID TE CO		ay Homes LLC		
SUBJECT	·	Name of Lim	tited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	m ali correspo	ondence concerning this matter	to the following:	
		Cheyenne Moscley		
			Name of Person	· —
		Legalzoom.com, Inc.		
			Firm/Company	
		100 W. Broadway Suite	100	
			Address	
		Glendale, CA 91210		
			City/State and Zip Code	
		dmcesario@gmail.com		
		E-mail address: (to be used for future annual report notifi	ication)
For further	information c	oncerning this matter, please c	all:	
lmelda Va	asquez		323 962-8600 ex	st 7950
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	s a check for th	ne 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**

Name of the Limited Liability Company as it now appears	
(Name of the Limited L	on our records.)
The Articles of Organization for this Limited Liability Company were filed on 02/2 Florida document number L14000031745	25/2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	<u>e</u>:
Leading Property Solutions LLC	
The new name must be distinguishable and end with the words "Limited Liability Company," the de-	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	Ze t
	A.T. Green
Enter new mailing address, if applicable:	<u>Κάς</u> ω γ
Mailing address MAY BE A POST OFFICE BOX)	MO 7
	75 RG
B. If amending the registered agent and/or registered office address on registered agent and/or the new registered office address here:	our records, enter the name of the m
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florid	la street address
	, Florida
City	Zip Code

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

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ľo.	Page	5	of.	6

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR= M AMBR= A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
		,	
			Add ·
			Remove
	•		
			AAR Remove
			PH STATE AND
			Remove
			Add
			☐ Remove
			D Add
			☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional	d sheets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be not be specific.	(optional) nore than 90 days after
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the date this document is filed by the Florida Department of State)	(optional) nore than 90 days after
Dated	
Dated 11/7/14, 2014	

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TALLAHASSEF FI ADDR.