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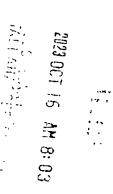
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TO: Registration Solution of Con		,			
F LC & Z HO	OMES UNLIMITED LLC				
SOBJECT.	Name of Limited Liability Company closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: CLAUDIA DIAZ Name of Person LC & Z HOMES UNLIMITED, LLC Firm/Company 710 MAGNOLIA AVE Address LEHIGH ACRES. FL 33972 City/State and Zip Code JRFIDELHDEZ@YAHOO.COM E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: DIA DIAZ Name of Person at (
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	& Z HOMES UNLIMITED LLC Name of Limited Liability Company icles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: CLAUDIA DIAZ Name of Person LC & Z HOMES UNLIMITED, LLC Finn/Company 710 MAGNOLIA AVE Address LEHIGH ACRES, FL 33972 City/State and Zip Code JRFIDELHDEZ@YAHOO.COM E-mail address: (to be used for future annual report notification) mation concerning this matter, please call: Z 239 Name of Person Area Code Daytime Telephone Number Ck for the following amount: g Fee S30.00 Filing Fee & Certified Copy (additional copy is enclosed) Address: Street Address:				
		Name of Person			
	LC & Z HOMES UNLIM	ITED, LLC			
		Firm/Company			
	710 MAGNOLIA AVE				
		Address			
		City/State and Zip Code			
	City/State and Zip Code JRFIDELHDEZ@YAHOO.COM				
	E-mail address: (to be used for future annual report noti	fication)		
For further information of	oncerning this matter, please c	all:	Telephone Number □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) ion orations		
CLAUDIA DIAZ		at (
Name o	f Person	Area Code Daytim	e Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy		
Mailing Addres					
Registration Section					
P.O. Box 632		The Centre of T			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LC & Z HOMES UNLIMITED, LLC				
(<u>Name of the Limited Liability Company as it now ap</u> (A Florida Limited Liability Compan	pears on our records.) y)			
The Articles of Organization for this Limited Liability Company were filed on	06/17/2014	aı	nd assign	ned
Florida document number L14000096937				
This amendment is submitted to amend the following:				
f amending name, enter the new name of the limited liability company here: ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." r new principal offices address, if applicable: Company Compan				
The new name must be distinguishable and contain the words "Limited Liability Company," the	ne designation "LLC" or the	abbreviati	on "L.L.C	<u> </u>
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		:: :::::::::::::::::::::::::::::::::::	<u>~</u> 2	
	· - ·		23	
	<u> </u>	=======================================	CT	•
Enter new mailing address, if applicable:		<u> </u>	5	1
			<u> </u>	C."
				1
		•		
B. If amending the registered agent and/or registered office address on ou agent and/or the new registered office address here:	r records, <u>enter the na</u>	me of th	e new r	egiste
Name of New Registered Agent:				
New Registered Office Address:				
	Florida street address			
	Florida			

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 dutics, 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.

City

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	FIDEL HERNANDEZ REMEDIOS	710 MAGNOLIA AVE	■Add
		LEHIGH ACRES, FL 33972	□Remove
		 	□ Change
TES	SERGUEY SANCHEZ RODRIGU	3218 24TH ST SW	■Add
		LEHIGH ACRES. FL 33976	□Remove
			□ Change
			🗀 Add
			□Remove
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n effective date is listed, the date mote: If the date inserted in this becument's effective date on the I	ust be specific and canno block does not meet th	re applicable statut	iling or more than 90 ory filing requiren	(optional) days after filing.) I nents, this date w	co Pursuani to 6 ill northe li	05.026 isted a
ecord specifies a delayed effecti is filed.	ve date, but not an ef	fective time, at 12:	01 a.m. on the earl	ier of: (b) The	90th day af	iter th
ted	·	13				
v al						
<u> </u>	Signature of a member					