To:

14072648400

From: Matterny Homes US HR



NOV 1 3 2024

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14072648400

## TO: Registration Section

Division of Corporations

Beachline South Residential LLC

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:

Nicole Marginian Swartz

Name of Person

Mattamy Homes

Firm/Company

490 Vineland Road Suite 450

Address

Orlando, Florida 32811

City/State and Zip Code

nicole.swartz@mattamycorp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Catalina Jaramilto 407 845-8192 at (\_\_\_\_\_) 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 S55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

cusign Envelope ID. 4C8517BF-9BAA-40A8-A		14072648400	From: Mattarny Homes US H
	2024-11-12 15:53:35 EST A2E-A2C189E9E5F9 ARTICLES OF AMI	ENDMENT	
	ТО		
	ARTICLES OF ORG.	ANIZATION	
	OF		
Beachline South Resider			
( <u>Name</u> (	of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	
The Articles of Organization for this	Limited Liability Company were	îled on <u>8/29/2014</u>	and assigned
Florida document number L14000136			
This amendment is submitted to amer	nd the following:		
A. If amending name, enter the new	w name of the limited liability co	ompany here:	
The new name must be distinguishable and c	oniain the words "Limited Liability Con	apany, the designation "LLC of I	the abbreviation "L.L.C.
Enter new principal offices address	, if applicable:		
(Principal office address MUST BE	A STREET ADDRESS)		
Enter new mailing address, if appli			
Enter new mailing address, if appli-			. 28
Enter new mailing address, if appli (Mailing address MAY BE A POST			
÷			202 N.)
(Mailing address MAY BE A POST	OFFICE BOX)		
(Mailing address MAY BE A POST B. If amending the registered agen	<u>OFFICE BOX)</u> t and/or registered office addres	s on our records, <u>enter the</u>	name of the new registered
(Mailing address MAY BE A POST	<u>OFFICE BOX)</u> t and/or registered office addres	s on our records, <u>enter the</u>	name of the new registered
(Mailing address MAY BE A POST B. If amending the registered agen agent and/or the new registered off	<u>OFFICE BOX</u> ) t and/or registered office addres ice address here:	s on our records, <u>enter the</u>	name of the new registered
(Mailing address MAY BE A POST B. If amending the registered agen	<u>OFFICE BOX</u> ) t and/or registered office addres ice address here:	s on our records, <u>enter the</u>	name of the new registered
(Mailing address MAY BE A POST B. If amending the registered agen agent and/or the new registered off	OFFICE BOX) t and/or registered office addres ice address here:		name of the new registered
(Mailing address MAY BE A POST B. If amending the registered agen agent and/or the new registered off Name of New Registered A	OFFICE BOX) t and/or registered office addres ice address here:	s on our records, <u>enter the</u> Enter Florida street address	name of the new registered
(Mailing address MAY BE A POST B. If amending the registered agen agent and/or the new registered off Name of New Registered A	OFFICE BOX) t and/or registered office addres ice address here:	Enter Florida street address , Florida	name of the new registered

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.

To:	A Page: 7 of 8	2024-11-12 15:53:35 EST	14072648400	From: Mattamy Homes US HH
	Docusign Envelope ID, 4C8517BF-9BAA-40A8-A 11 ameniating Authorized Person(s) :	A2E-A2C1B9E9E5F9 nutnorized to manage, <u>enter the</u>	title, name, and address of ea	ch person_being added
	or removed from our records:			

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VP	Donna Walls	4901 Vineland Road Suite 450	∎Add
		Orlando, Florida 32811	[]:Remove
			□Change
			□ Add
		<u> </u>	
			🗆 Add
			🗆 Remove
			🗆 Change
	<u> </u>		🗆 Add
			□ Remove
		·	□Change
,		🗆 Add	
			🗆 Remove
		□Change	
		🗆 Add	
			🗆 Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)


If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	11/4/2024
	Docusigned by: Nicola Swarty
	FBCB3DA054064F8 Signature of a member or authorized representative of a member
	Nicole Marginian Swartz

Typed or printed name of signee