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COVER LETTER

		egistration Section vivision of Corporations					
ens nez		AFFORDABLE HOUSING OF HOMESTEAD, LLC					
SUBJEC	T:Name of Limited Liability Company						
The encl	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please re	turn all correspo	ndence concerning this matter	to the following:				
		JOSEPH LENTS					
			Name of Person				
AFFORDABLE HOUSING OF HOMESTEAD, LLC							
	Firm/Company						
		1788 BANYAN CREEK CIRCLE, N					
		****	~ 				
		BOYNTON BEACH, FI	BOYNTON BEACH, FLORIDA 33436				
			City/State and Zip Code				
		jlents2001@yahoo.com E-mail address: (to be used for future annual report notification)					
For furth	er information co	oncerning this matter, please ca		,			
	PH LENTS		561 929-2266				
	Name of	f Person	at ()	Felephone Number			
			•	•			
Enclosed	l is 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Addres Registration S		Street Address: Registration Secti	ion			

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limit		pany as it now appears on our reco d Liability Company)	rds.)
	(A Florida Limite	d Liability Company)	
he Articles of Organization for this Limited Li	iability Compar	ny were filed on	and assigned
orida document number L15000122505	·		
nis amendment is submitted to amend the follo	owing:		
. If amending name, enter the new name of	f the limited <u>li</u> z	ability company here:	
N/A			
ne new name must be distinguishable and contain the w	vords "Limited Lia	bility Company," the designation "LI	.C" or the abbreviation "L.L.C."
nter new principal offices address, if applic	able:	N/A	
Principal office address MUST BE A STREE			
Theipul office unuress WOST DE A STREE	T ADDKLSS		
			2
ntor now mailing address if applicables		N/A	020 (
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u>БОА)</u>		, 3 F
			PHO
. If amending the registered agent and/or r	egistered office	e address on our records, ente	~
gent and/or the new registered office addres		,	57
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
Hen Regimered Office Address.		Enter Florida street addi	ress
		1	Florida
		City	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

It 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>	Address	Type of Action
MGR	Lorne Wray	11419 W Palmetto Parkway RD	□Add
		970102	■Remove
		Boca Raton, Florida 33497	□Change
			□ Add
			Remove
			□ Change
			Add
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Filing I	Pate
ctive date, if other than the date of filing:	(optional) for to date of filing or more than 90 days after filing.) Pursuant to 605.0
e: If the date inserted in this block does not meet the app	licable statutory filing requirements, this date will not be listed
ument's effective date on the Department of State's record	
	e time, at 12:01 a.m. on the earlier of: (b) The 90th day after
filed.	
December 2 2020	
ed	 ·
- Joeph De	wis
# 65 # 6 L /	the sixed assessmenting of a security of
Signarture of a member or au	thorized representative of a member

Filing Fee: \$25.00