

45000169870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

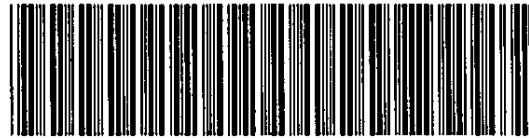
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000293933600

01/09/17--01020--014 **25.00

17 JAN -9 PM 4:02

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 10 2017
S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REGULAR INVESTMENTS LLC

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:

VITALIY PERSHIN

Name of Person

HOU3E INC

Firm/Company

8320 SANDS POINT BLVD SUITE M208

Address

TAMARAC, FL 33321

City/State and Zip Code

BUYINGFORCASH@GMAIL.COM

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

For further information concerning this matter, please call:

VITALIY PERSHIN

954 614-0878
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

☐ \$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

17 JAN -9 PM 4: 02
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

REGULAR INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/06/2015 and assigned
Florida document number L15000169870.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

HOU3E 4 LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or 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 applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: HOU3E INC

New Registered Office Address: _____

Enter Florida street address

_____, 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

If 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	PERSHIN, VITALIY	8320 SANDS POINT BLVD	<input type="checkbox"/> Add
		SUITE M208	<input checked="" type="checkbox"/> Remove
		TAMARAC, FL 33321	<input type="checkbox"/> Change
MGRM	PROPERTY TRUST	8320 SANDS POINT BLVD	<input type="checkbox"/> Add
		SUITE M208	<input checked="" type="checkbox"/> Remove
		TAMARAC, FL 33321	<input type="checkbox"/> Change
MGR	HOU3E INC	8320 SANDS POINT BLVD	<input checked="" type="checkbox"/> Add
		SUITE M208	<input type="checkbox"/> Remove
		TAMARAC, FL 33321	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

RECEIVED
 JAN 9 PM 4:00
 TALLAHASSEE
 SECRETARY OF STATE

17 JUN -9 PM 4: 02

77 JAN -9 PM 4:02

SECRETARY (1000)
TALLAHASSEE

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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

1-6, 2017

Signature of a member or authorized representative of a member

VITALIY PERSHIN

Typed or printed name of signee