

| (Requ | uestor's Name) | |
|----------------------------|----------------|-------------|
| (Addi | ess) | |
| (Addi | ress) | |
| (City/ | State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | ness Entity Na | me) |
| (Docu | ument Number |) |
| Certified Copies | Certificate | s of Status |
| Special Instructions to Fi | ling Officer: | |
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Office Use Only



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SECRETARY OF STATE
TAILORDERS
TO THE SECRETARY OF STATE
TO THE SECRE

D. SCOTT MAR. 9 2017

COVER LETTER

| Division of Corp | porations | | | | |
|--------------------------------------|--|---|--------------------|----------|----------------|
| OHANA HO | OMES LLC | | | | |
| SUBJECT: | Name of Limi | ited Liability Company | | | |
| The enclosed Articles of A | Amendment and fee(s) are sub- | mitted for filing. | | | |
| Please return all correspor | ndence concerning this matter | to the following: | | | |
| | BENJAMIN LOHR | | | | |
| | | Name of Person | | | |
| | | Firm/Company | | | |
| | 4936 LAKE SHARP DR | | | | |
| | ORLANDO, FL 32817 | Address | | | |
| | | City/State and Zip Code | | | |
| | BENNYLOHR@COMCAS E-mail address: (1 | T.NET to be used for future annual report noti | fication) | | |
| For further information co | oncerning this matter, please ca | પ્રી: | | , : | |
| BENJAMIN LOHR | | 407 595-1927 at () | | 1 SEC 1 | į |
| Name of | Person | Area Code Daytim | e Telephone Number | 高等 | FILED. |
| Enclosed is a check for th | e following amount: | | | | 罪, 口 |
| ■ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | ing Fee, | () () () |

MAILING ADDRESS:

TO: Registration Section

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

| OHANA HOMES LLC | | |
|---|--|---------------------|
| (Name of the Limited Liability Company a (A Florida Limited Liab | s it now appears on our records.) | |
| The Articles of Organization for this Limited Liability Company we Florida document number | re filed on | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liability | company here: | |
| The new name must be distinguishable and contain the words "Limited Liability CEnter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | Company," the designation "LLC" or the a | |
| Enter new mailing address, if applicable: | | |
| B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: | e address on our records, enter | the name of the nev |
| Name of New Registered Agent: | AL CAR | FILED. |
| New Registered Office Address: | Enter Florida street address | |
| | Emer r ioriau street aaaress | |

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.

City

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> | Address | Type of Action |
|---------------|--|--------------------|--|
| AMBR | BENJAMIN R LOHR | 4936 LAKE SHARP DR | □ Add |
| | | ORLANDO, FL 32817 | ☑ Remove |
| | | | ☐ Change |
| AMBR | ANNA D LOHR | 4936 LAKE SHARP DR | |
| | | ORLANDO, FL 32817 | ☑ Remove |
| | | | ☐ Change |
| AMBR | Benjamin Randulph Lohr | 4936 LAKE SHARP DR | ₽ Add |
| and Trus | Anna Catherine Davich Lohn, Hers, or their successors in int | ORLANDO, FL 32817 | ☐ Remove |
| of t Livin | the Benjamin and Anna Loh ig Trust dated November 25 5, and any amendments the | · | Change |
| 2015 | , and any amendments the | | Add |
| | ζ» | | Remove |
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| Effective date, if other than the | date of filing: | | (opti | onal) |
| (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De | ck does not meet the a | pplicable statutory: | or more than 90 days after filing requirements, thi | filing.) Pursuant to 605.02 s date will not be listed |
| | | | | 三部 二 |
| the record specifies a delayed) The 90th day after the reco | | it not an effectiv | ve time, at 12:01 a | a.m.m.ftha.garlier |
| FERBUARY 10 | 2017 | | | 28年0 13 |
| Dated | , | · | | 470 至 5 |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00