Ulanono5209

(Requestor's Name)
(104,000,000,000,000,000,000,000,000,000,
(Address)
(Address)
(City/State/Zip/Phone #)
(Okyrotato/Liph Hono II)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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NOV 10 2016 S. YOUNG TALLARINSSEE PLORIUS

COVER LETTER

TO:	Registration So Division of Co				
CUDI	ECT.	HOMESFO	DRCASH305 LLC		
SUBJ	ECI:	Name of Lim	ited Liability Company	•	
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
			FERNANDO PINA		
	Name of Person				
		Н	OMESFORCASH305 LLC		
		8773 SW 22	O LA Firm/Company		-mt (5)
		8773 SW 22 Cufler BAy	FC 33190		16 NOV -9 PM 2: 40
			City/State and Zip Code		6
			mesforcash305@yahoo.com		2
For fu	rther information o	E-mail address: (concerning this matter, please co	to be used for future annual report not	fication)	9 PH 2: 40
		ANDO PINA	786 2869893 at ()		
	Name o	of Person	Area Code Daytin	e Telephone Number	
Enclo	sed is a check for t	he following amount:			
\$2	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 Statu Certified Copy (additional copy is enclo	
	Regist Divisio	JING ADDRESS: ration Section on of Corporations	STREET/COUR Registration Section Division of Corpo	on	
		ox 6327 assee, FL 32314	Clifton Building 2661 Executive Co	enter Circle	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOMESFORCASH305 L	LC		
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appear bility Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company we	ere filed on	01/07/2016	and assigned
Florida document numberL16000005209			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabilit	ty company he	ere:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the d	esignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			5
			<u> </u>
			10 000
Enter new mailing address, if applicable:			P (H) C
(Mailing address MAY BE A POST OFFICE BOX)	8773 S	W 220TH LN	70
	CUTLE	ER BAY, FL 33190	5 0
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here: Name of New Registered Agent:	ce address on	our records, <u>enter</u>	the name of the new
New Registered Office Address:			
	Enter Flo	rida 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>	Address	Type of Action
MGR	FERNANDA PINA	8773 SW 220TH LN	Add
		CUTLER BAY, FL 33190	□ Remove
			☐ Change
			Add
			Remover CA
			Add PA 200
			Add Remove
		•	☐ Change
			□ Add
			Remove
			Change
<u></u>			□ Add
			☐ Remove
			Change
			Add
			□ Remove
			☐ Change

PLI	EASE AMEND THIS EMAIL FOR FUTURE CONTACT: homesforcash305@yahoo.com
F	Please Sent All Future MAIL to this
4	ew ADDRESS;
	FERNANDO PINA 8773 SUL 220 La
_	Cutler Bay, FC 33190
	5 No. 10
	-9 PM 2: 4
	2: 4
`an effect Note: If	date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of 0 th day after the record is filed.
ated	11/03/2016
	() // and Attack
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00