L160006 58207

(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



500286280355

05/31/16--01020--006 **25.00

15 MAY 31 PH 5: 35

Division of Cor		•	
STAGE 1 I SUBJECT:	HOUSE BUILDERS LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	SAINZ, JUAN CARLOS		
		Name of Person	
	STAGE I HOUSE BUILI	DERS LLC	
		Firm/Company	
	2423 SW 147 AVE		
		Address	
	Miami, FL 33175		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	•
SAINZ, JUAN CARLO	S	305 303-5442	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STAGE I HOUSE BUILDERS LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L16000058203</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the a	obreviation "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 or registered agent and/or the new registered office address here.		the name of the new
Name of New Registered Agent:		3
		25%
New Registered Office Address:	Enter Florida street address	800 0
	City	Zip Code?
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	5.
I hereby accept the appointment as registered agent and age provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am provided for in Chapter 605, F.S. Or	familiar with and if this document is

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>	Type of Action
AMBR	SAINZ, JUAN CARLOS	14461 SW 22ND TERRACE	
		Miami, FL 33175	□ Remove
			■ Change
			□ Add
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Add
		 	Remove
			☐ Change
			□ Remove
			☐ Change
			□ Add
			□ Remove
			□ Change

New address is 2423 sw 14	7 ave Miami, FL 33185		
***************************************	·		
<u></u>			···-
			
		<u> </u>	
			·
fective date, if other than th	ne date of filing: 05/27/2017	(options	al)
ote: If the date inserted in this	oust be specific and cannot be prior to date of block does not meet the applicable statu	filing or more than 90 days after fill atory filing requirements, this days	ng.) Pursuant to 605.020 ite will not be listed a
ocument's effective date on the	Department of State's records.		
			on the earlier o
e record specifies a delayo The 90th day after the re	ed effective date, but not an effectord is filed.	rective time, at 12:01 a.n	i. On the earner t
The 90th day after the re	ecord is filed.	rective time, at 12:01 a.n	i. off the earner t
		rective time, at 12:01 a.n	16 M
The 90th day after the re	ecord is filed.	rective time, at 12:01 a.n	To MAY S
The 90th day after the re	ecord is filed.		16 MAY 3 PA

Page 3 of 3

Filing Fee: \$25.00