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M. HARRIS

COVER LETTER

	Registration Se Division of Cor			
SUÉTEC	EFB HOM	ES LLC	*	
SUBJEC		Name of I	Limited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are	submitted for filing.	
Please re	turn all correspo	endence concerning this mat	eter to the following:	
		ALAA K ALSHARIF		
			Name of Person	
		EBF HOMES LLC		
	Division of Corporations EFB HOMES LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. se return all correspondence concerning this matter to the following: ALAA K ALSHARIF Name of Person EBF HOMES LLC Firm/Company 5010 TERRACE PALMS CIR, UNIT 102 Address TAMPA, FL, 33617 City/State and Zip Code alaa_alsharif@yahoo.com E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: NA ALSHARIF Name of Person A Alsharif Code at (407			
		5010 TERRACE PALM	AS CIR, UNIT 102	
			Address	· · · · · · · · · · · · · · · · · · ·
		TAMPA, FL, 33617	•	
			City/State and Zip Code	
		E-mail addres	ss: (to be used for future annual report noti	fication)
For furth	er information c	oncerning this matter, pleas	e call:	
ALAA A	LSHARIF			
·	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	e following amount:		
■ \$25.0	00 Filing Fee		Certified Copy	Certificate of Status &

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

EFB HOMES LLC		
(Name of the Limited Liabili	ty Company as it now appears on our records.) a Limited Liability Company)	
(A FIORE)	10/20/14	
The Articles of Organization for this Limited Liability (Company were filed on ELECTROBICALLY	and assigned
Florida document number L16000193678		
Florida document number	_ ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	ited Liability Company," the designation "LLC" or the abb	reviati on "L.L.C."
	, , , ,	
Enter new principal offices address, if applicable:		All Annual Control of the Control of
(Principal office address MUST BE A STREET ADDI	RESS)	23 72
		> 10 m
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		he name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	

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
AMBR	LANG LIN	5010 TERRACE PALMS CIR, 102	
		TAMPA, FL, 33617	■ Remove
			Change
			🗖 Add
			☐ Remove
			Change
			Add
			Remove
			Change
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change T
			Change Add
			Cn ⊕
			Change

LEASE CHANGE MY LLC TO S	SINGLE MEMBER, ONLY ME	ALAA K ALSHARIF	
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		· · · · · · · · · · · · · · · · · · ·	
			····
ve date, if other than the date of the date is listed, the date must be spelf the date inserted in this block doesnt's effective date on the Departm	ecific and cannot be prior to date of f es not meet the applicable statut	(optio filing or more than 90 days after to cory filing requirements, this	filing.) Pursuant to 60:
ord specifies a delayed effection 90th day after the record is		ective time, at 12:01 a	.m. on the earli
01/18/2017			
			17
· A The	· Vic		
Stenati	ure of a member or authorized repre	esentative of a member	

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Filing Fee: \$25.00