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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

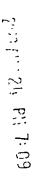


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C. GOLDEN 0CT - 7 2020

COVER LETTER

	Registration So Division of Cor			
C110 107		OUR HOME LLC - Amended t	o SOUTHERN MANAGER LLC	Ç
SUBJEC	.1;	nited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		RYAN TOMKA		
		 .	Name of Person	
		SOUTHERN MANAGER	LLC	
Firm/Company				
1915 1st St				
			Address	
		Neptune Beach, FL 32266		
			City/State and Zip Code	
		RTOMKA@gmail.com		
			to be used for future annual report n	otification)
For furth	er information c	oncerning this matter, please c	all:	
Ryan To	mka		904 891-6710 at ()	
Name of Person		Area Code Dayt	ime Telephone Number	
Enclosed	is a check for the	he following amount:		
□ \$25.0	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		Street Address: Registration S		
Division of Corporations P.O. Box 6327		Division of Corporations		
Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YOUR HOME LLC

2017 1 24 PM 7: 09

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

	/A1 (A2)	2013
The Articles of Organization for this Limited Liability		and assigned
Florida document number 1.17000001646		
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the I	imited liability company here:	
SOUTHERN MANAGER LLC		
The new name must be distinguishable and contain the words "I	Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	-	
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registe	red office address on our recor	ds, enter the name of the new register
agent and/or the new registered office address her	<u>e</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		Florida
	Ciţ	Zip Code
New Registered Agent's Signature, if changing Registe	ered 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Remove
			□Change
			□Add
			□Remove
			(TC)wran

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 August 12 2020 Signature of a member or authorized representative of a member

Typed or printed name of signee

Ryan Tomka