47000002596

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J. HARRIS

COVER LETTER

	gistration Se vision of Cor			
SUBJECT:	Yellowfin F	Realty JaxHomes, LLC		
SUBJECT	·	Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Wesley Benwick		
			Name of Person	
		Yellowfin Realty JaxHome	es, LLC	
			Firm/Company	
		PO Box 551604		
			Address	***************************************
		Jacksonville, FL 32255		
		<u> </u>	City/State and Zip Code	
		wbenwick@jaxhomes.com		
		E-mail address: (to be used for future annual report notifi	cation)
For further i	information co	oncerning this matter, please ca	all:	
Wesley Ber	wick		904 477-7556 at ()	
	Name of	Person		Telephone Number
Enclosed is	a check for th	e 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

Yellowfin Realty JaxHomes, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on January 4th, 2017	and assigned
Florida document number L17000002596		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>s)</u>	
		=
		A 30
Enter new mailing address, if applicable:		(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
(Mailing address MAY BE A POST OFFICE BOX)		~
		₹
		** 22
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		the name of the ne
**		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida 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>	<u>Address</u>	Type of Action
MGR	Luke Morris	321 10th Ave N	
		Jacksonville Beach, FL 32250	■ Remove
			Change
MGR	Chris Koek	3794 Saltmeadow Ct S	□ Add
		Jacksonville, FL 32224	Remove
			☐ Change
MGR	Mike W White	12791 Huntley Manor Dr	_ □ Add
		Jacksonville, FL 32224	Remove
			☐ Change
			□ Remove
		.	Change
			Remove
			☐ Change
			PH + 02
			Remove
			Change

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(If an effective date is liste Note: If the date inser document's effective of the record specifies	der than the date of filing:	a) Pursuant to 605.0207 (3)(b) will not be listed as the
January 3 let	ter the record is filed.	
Dated	Signature of a member or autilorized representative of a member	
	Wesley A Sanick Typed or printed name of signee	-2.1 -2.1
	Page 3 of 3	OF STATE

Filing Fee: \$25.00