## 11700047880

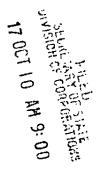
(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Amend	

Office Use Only



100304251761

10/10/17--01025--016 \*\*25.00



M. MILLIGAN OCT 12 2017:

## **COVER LETTER**

TO: Re	gistration Sec	tion		
אע	vision of Corp	orations		Par Special
SUBJECT:	Susie Homes	s, LLC		
		Name of Lin	nited Liability Company	
The enclosed	d Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		Frank Lin		
			Name of Person	
			Firm/Company	
		5 Spruce Street		
			Address	
		Nanuet, NY 10954		
		flin1522@yahoo.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report no	ification)
For further in	nformation con	cerning this matter, please c	all:	
Logan McEv			904 7019590 at ( )	
	Name of P	erson	Area Code Daytin	ne Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$69.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section

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, OCT TO ARTICLES OF ORGANIZATION OF AH 9.00

Susie Homes, LLC

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

The Articles of Organization for this Limited Liability Company Florida document number L17000047880	were filed on 03/01/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5 Spruce Street
(Principal office address MUST BE A STREET ADDRESS)	Nanuet, NY 10954
Enter new mailing address, if applicable:	5 Spruce Street
(Mailing address MAY BE A POST OFFICE BOX)	Nanuet, NY 10954
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
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	Palmer, Jason	806 Talleyrand Ave.	
		Jacksonville, FL 32206	■ Remove
		806 Talleyrand Ave.	Change
MGR	Libertas REI, LLC	Jecksonville, FL 32206	Add
			■ Remove
			Change
MGR	Frank Lin	5 Spruce Street	B Add
		Nanuet, NY 10954	☐ Remove
			☐ Change
			□ Add
		<del> </del>	☐ Remove
		·	☐ Change
			□ Add
			C Remove
			□ Change
			Add
			☐ Remove
			□ Change

). If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necess	ary.)
	• • •	
		<u> </u>
		<del></del>
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		<del>-</del>
Note: If to document'	date, if other than the date of filing:	ate will not be listed as the
Dated Oct	2017	<b></b> .
	Signature of a member or authorized representative of a member	SEARE DIVISION
	FRANK LIN	TARY COR
	Typed or printed name of signee	PAR 9
		) 18 ATTOM 9: 00
	Page 3 of 3	⊖ #.

Filing Fee: \$25.00