L17000119357

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COVER LETTER

TO: Registration S Division of Co			
	ne Investment LLC	· .	6
SUBJECT:		ited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	-	
	HUMAYOON BHATTI		
		Name of Person	
		Firm/Company	
	8619 Terrace Pines Court		
		Address	
	Orlando, FL 32836		
		City/State and Zip Code	
	Greathomeinvestment@gm		
	E-mail address: (to be used for future annual report notif	ication)
For further information (concerning this matter, please c	all:	
HUMAYOON BHATT	Ī	407 4920948	
Name o	of Person	at () Area Code Daytime	2 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Great Home Investment 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 were filed on 05/31/2017 and assigned Florida document number L17000119357 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 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
AMBER	ARSH BHATTI	8619 Terrace Pines Court Orlando FL 32836	■Add
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