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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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COVER LETTER

	Registration Se Division of Cor		•			
SUBJEC	Homeinc R	ealty LLC	•			
30120		Name of Lim	ited Liability Company			
		Amendment and fee(s) are submodence concerning this matter				
T rease rec	an correspo	Angela Letourneau	to the rone wing.			
			Name of Person	<u> </u>		
		Homeinc Realty LLC				
			Firm/Company			
		1830 W Broward Blvd				
			Address			
		Fort Lauderdale, FL 33312	:		7,5	٠, 5
		angela,letourneau@gmail.co	City/State and Zip Code		ia inglatin	: (1) : (1) : (2) : (3) : (4)
		E-mail address: (to be used for future annual report notifi	cation)	-3	
For furthe	er information c	oncerning this matter, please ca	all:		.¥	
Angela L	_etourneau		612 384-2644 at ()		ST 77 78	RY OF STATE
-	Name o	f Person	Area Code Daytime	Telephone Number		72
Enclosed	is a check for th	ne 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 Stat Certified Copy (additional copy is end		

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

Homeinc Realty LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our reco Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability C	ompany were filed on 7/13/2017	and assigned
Florida document number	<u>_</u> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "L	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	<u> </u>
		<u> </u>
		63
Enter new mailing address, if applicable:		\$0 <u>0</u>
(Mailing address MAY BE A POST OFFICE BOX)		in de
		77
	 	S S
B. If amending the registered agent and/or regis		rds, enter the name of the-n
registered agent and/or the new registered office add	ress here:	V. 0
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street ada	tress
		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>	Address	Type of Action
MGR	Daniel Gitlin	1830 W Broward Blvd	
		Fort Lauderdale, FL 33312	U Add
			■ Remove
			Change
MGR	Angela Letourneau	1830 W Broward Blvd	
		Fort Lauderdale, FL 33312	Add
			□ Remove
			☐ Change
MGR	Matthew Letourneau	1830 W Broward Blvd	
		Fort Lauderdale, FL 33312	Add
			☐ Remove
		·	☐ Change
			□ Add
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			Change

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C Eff	10/29/2018
Note:	(optional) Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
f the re b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	
	Signature of a member or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00