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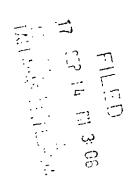
(Re	questor's Name)	
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D. SCOTT SEP 1 5 2017

COVER LETTER

	legistration Division of C	Section orporations		
CUBICO		S HOMES, LLC		
SUBJECT	l:	Name of Lin	nited Liability Company	
The enclos	sed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please retu	ırn all corres	pondence concerning this matter	to the following:	
		S. ANN WILSON		
	Name of Person			
WHARTON LAW GROUP, P.A.				
	Firm/Company 456 S. CENTRAL AVE.			
			Address	
	OVIEDO, FL 32765			
			City/State and Zip Code	
		ANN@WHARTONLAWO	GROUP.COM (to be used for future annual report notific	eation
For further	r informatior	concerning this matter, please c	·	
S. ANN V	VILSON		407 365-7193 at ()	-7
		e of Person	Area Code Daytime	Telephone Number
		the 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 Fec, 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

HODES HOMES, LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comparing document number <u>L17000181285</u>	any were filed on 8/24/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		ter the name of the ne
		3 1
Name of New Registered Agent:	-	
New Registered Office Address:		
	Enter Florida street address	ب

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	MAGIE S. HODGES		
			■ Remove
			☐ Change
MGR	ROBERT HODGES	850 Seminole Woods Blvd	■ Add
		Geneva, FL 32732	□ Remove
			Change
			Add
			Remove
			□ Change
			□ Remove
			☐ Change
			O Add
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		.	☐ Remove
			□ Change

f amending any other informati	⊕-\-/v	,	. 5	
				
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Tective date, if other than the d	ate of filing:		(optional)	-m\
un effective date is listed, the date must bote: If the date inserted in this bloc	se specific and cannot be prior to	date of filing or more than	90 days after filing.) Pu	rsuant to 605.020
cument's effective date on the Dep	artment of State's records.	e statutory ming require	cinents, uns date wir	not be fisted as
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record specifies a delayed e	effective date thut not a	an effective time la	t 12:01 a.m. on	the earlier o
The 90th day after the recor	d is filed.	m checave and, a		are equiner o
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Si	gnature of a member or authoriz	ed representative of a men	nber	
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Page 3 of 3

Filing Fee: \$25.00