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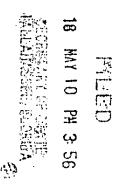
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O SIMMONS MAY 1 4 2018



April 25, 2018

KEVIN ROSS-ANDINO 2180 W STATE RD 434 STE 2100 LONGWOOD, FL 32779

SUBJECT: HODGES HOMES, LLC

Ref. Number: L17000181285

We have received your document for HODGES HOMES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete section 5(a) on form.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist III

Letter Number: 718A00008556

. COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Hodges Homes,	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Hevin H. Thoss-Andino Name of Person	
EClat Law LLP Firm/Company	
2180 w. State Proad 434, 3	STE 2100
Larrywood, Fluvida 3277 City/State and Zip Code	9
hevin, russ petiatiaw. com E-mail address: (to be used for future annua	al report notification)
For further information concerning this matter, p	lease call:
Hevin H. Thoss-Andino Name of Person	at (407) (310-7004) Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following a	mount:
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1 10/14	и.
1. N	ame of the limited liability company: Hodges Homes, LLC
2. (a)	(b)
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	850 Seminole Woods Blud 850 Seminole Woods Blud
	Generva, FL 32732 Geneva, FL 32732
	8/24/2017 47-000181285
3.	Date of filing/registration in Florida 4. Document number
_	
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	James Hadges
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	850 Geneva Woods Blud.
	i i m
	Geneva , FL 32732 \$ 3
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	NEW Registered Office Address:
	2180 W. State Proad 434, Suite 2100
	Longwood , FL32997-5009
If tha l	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
	ange or changes are made, the Florida street address of the registered office and the business office of the registered
agent v	will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
	ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in itself of organization or the operating agreement of the limited liability company.
Signa	the of a member or authorized representative of a member Printed or typed name of signee
proviși	by accept \ the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept
the obl to mer	ións of all'statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been
not fie	d'In writing of this change

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent