## L18000034340

(Requestor's N	Varne)
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Special Instructions to Filing Office	er:
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## **COVER LETTER**

TO:	Registration S Division of Co			
CHIDIC		Homes of Florida LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		Beverly Smith		
		Caribbean Homes of Florid	Name of Person	
		4831 Coronado Parkway	Firm/Company	
		Cape Coral, Florida 33904	Address	
		HQ@CaribbeanHomesFL.co	City/State and Zip Code om	
		E-mail address (	to be used for future annual report notif	ication)
For furth	ner information c	oncerning this matter, please ca	dl:	
Beverly	,		407 575-6086	
	Name o	f Person	Area Code Daytimo	: Telephone Number
Enclosed	d is a check for th	ne 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 Taliahassee, 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

	, Flori	
	Enter Florida street address	
New Registered Office Address:		<del> </del>
Name of New Registered Agent:		
registered agent and/or the new registered office address he	•	
B. If amending the registered agent and/or registered	office address on our records,	enter the name of the ne
		0. <u>S</u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
Enter new mailing address, if applicable:		
		<b>24</b> 2000 PARTS
	<del></del>	<b>第 2</b>
Principal office address MUST BE A STREET ADDRESS)		8 ≤≤
Enter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" o	r the abbreviation "L.L.C."
A. If amending name, <u>enter the new name of the limited lia</u>	bility company nere:	
This amendment is submitted to amend the following:	1.00	
Florida document number L18000034340		
The Articles of Organization for this Limited Liability Compan	w were filed on 02/07/2018	and assigned
(A Florida Limited	Liability Company)	
(Name of the Limited Liability Comr	pany as it now appears on our records.)	

## 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	French, John E	4831 Coronado Parkway, Cape Coral, Florida 33904	<b>a</b> Add
			□ Remove
			Change
			D Add
			☐ Remove
			Change
			Remove
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Effective date, if other than the date is listed, the date must b	ite of filing:	of filing or more than 90 days after filing.) Pur	rsuant to 605.020
Note: If the date inserted in this block locument's effective date on the Department.	c does not meet the applicable sta	atutory filing requirements, this date will	not be listed a
ie record specifies a delayed e The 90th day after the recor		effective time, at 12:01 a.m. on	the earlier o
Dated September 19	2018		
1		epresentative of a member	

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Typed or printed name of signee

Filing Fee: \$25.00