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SECRETARY OF STATE TALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

N COOPER MAR 3 0 2018

COVER LETTER

	Registration Se Division of Cor			
en nuz		Luxury Homes LLC		
SUBJEC	ï:		ited Liability Company	
The enclo	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Louise Walker		
			Name of Person	
		Cornerstone Luxury Home	es LLC	
			Firm/Company	······································
		140 Island Way #243		
			Address	
		Clearwater Beach, FL 337	67	
			City/State and Zip Code	 _
		louise @cornerstoneluxuryh		· · · · · · · · · · · · · · · · · · ·
For furthe	er information co	e-mail address: (incerning this matter, please co	to be used for future annual report not all:	meadon)
Louise W	falker		603 2750185	
	Name of	Person	at () Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	e following amount:		
冒 \$25.0	O 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 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

Cornerstone Luxury Homes LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Torida document number 1.18000061922	were filed on 03/08/2018	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Ltabi	ility Company." the designation "LLC" or th	ne abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	<u> </u>	MAR
		- R HAS
		9 SEE
nter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	- <u>-</u>	55 S
		
 If amending the registered agent and/or registered o egistered agent and/or the new registered office address her 		ter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	P. Phys. 17	
	Enter Florida street address	
	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	Robert Walker	140 Island Way #243	■ Add
· · · · ·		Clearwater Beach, FL 33767	5 0
			□ Change
MGR	Angie Gemmell	140 Island Way #243	D Add
		Clearwater Beach, FL 33767	■ Remove
		···	Change
			Add
			☐ Change
			O Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			□ Remove
			□ Channe

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)		
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	- 29	ASS
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	- 55	STATE LORIDA
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E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to to Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.	505.0207 (3) isted as the)(b) e
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlib). The 90th day after the record is filed.	rlier of:	
Dated 03/30/2018		
Signature of a member or authorized representative of a member		
Louise Walker		
Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00