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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 19, 2018

SUNSHINE CORP

SUBJECT: K. HOVNANIAN SOLA VISTA, LLC

Ref. Number: L18000085436

Corrected-Place allere for initial fere date

We have received your document for K. HOVNANIAN SOLA VISTA, 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):

i *U*

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Yasemin Y Sulker Regulatory Specialist II



Letter Number: 418A00007949

FILED

2018 APR 20 AM IO: 52

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	K. Hovnanian Sola Vista, LLC	
(Name of the Limite (d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Lia	ability Company were filed onApril 04, 2018	and assigned
Florida document number <u>L18000085436</u>	·	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	3OX)	
B. If amending the registered agent and/o registered agent and/or the new registered off	r registered office address on our records, <u>entr</u> ice address here:	tile name of the ne
Name of New Registered Agent:		> O
New Registered Office Address:	Enter Florida street address	28 28
	, Florida _	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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
		-	☐ Change
			Add
			Remove
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			Add
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			□ Remove
			Change
		-	Add
			□ Remove
			Change

Amending Article IV Authorized Memb	per's (Hovnanian Developments of	Florida, Inc.) address to	read:
90 Matawan Road - 5th Floor, Matawar	n, NJ 07747		
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ffective date, if other than the date of f	filing:	(optional)	9
an effective date is listed, the date must be specifiote: If the date inserted in this block does r	ic and cannot be prior to date of filing or a not meet the applicable statutory fili	nore than 90 days after filing.) ng requirements, this date v	Firsuant to 605 Will not be liste
ocument's effective date on the Department	of State's records.		
e record specifies a delayed effective	ve date but not an effective	time, at 12:01 a.m. o	on the earlie
The 90th day after the record is fil			., .,,
ated April 17th	2018		
ated	· · · · · · · · · · · · · · · · · · ·		
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Signature	of a member or authorized representative	e of a member	

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Filing Fee: \$25.00