Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

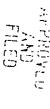
Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ISPOT HOMEBUYERS, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00



Electronic Filing Menu — Corporate Filing Menu

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Spot HomeBuyers, LLC.		
(Name of the Limited Liabi (A Florid	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 08/16/2018	and assigned
Florida document number L18000196256	·	
This amendment is submitted to amend the following: $\frac{1}{2} \frac{1}{2} $		
A. If amending name, enter the new name of the lin	mited liability company here:	
ISPOT HOMES, LLC		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>
(Principal office address MUST BE A STREET ADD	DRESS)	
N		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register		name of the new registered
agent and/or the new registered office address here:	:	26
		723
Name of New Registered Agent:		
New Registered Office Address:		<del></del>
	Enter Florida street address	_ Hegg
<u> </u>	, Florida	<u> </u>
	City	Zip Cotte
New Registered Agent's Signature, if changing Register	red Agent:	် ယ

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.

!f 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
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Effective date, if other than the data must be a liften effective date is listed, the date must be a liftened in this block document's effective date on the Dep	se specific and cannot be prick does not meet the appl	or to date of filing or more leable statutory filing r	than 90 days after filing	.) Pursuant to 605.020
e record specifies a delayed effective order is filed.	date, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) Th	ne 90th day after the
Dated 07/18	2023			
Na	ignature of a member or aut	horized representative of	Tamember 1	
	-	·		
Nat Smith				

Filing Fee: \$25.00