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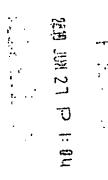
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COVER LETTER

TO: Registration Se Division of Cor			
Radiant Ho SUBJECT:	omes L.L.C.		
JOBSECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kevin P. Callaghan Jr.		
		Name of Person	
	RADIANT INVESTMENT	TS LLC	
		Firm/Company	
	3106 W Van Buren Dr	. ,	
		Address	 -
	Tampa, FL 33611		
	radianthomesllcfl@gmail.co	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	ication)
For further information c	oncerning this matter, please ca	all:	
Kevin P. Callaghan Jr		352 232-1180 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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 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

RADIANT HOMES LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 223 月月 27 P 1: 64 The Articles of Organization for this Limited Liability Company were filed on $\frac{03/11/2019}{1}$ Florida document number L19000068614 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RADIANT INVESTMENTS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

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>	Name	<u>Address</u>	Type of Action
			Add
			□ Remove
			Change
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fective date, if other than the effective date is listed, the date in this otte: If the date inserted in this ocument's effective date on the	ust be specific and colock does not me	annot be prior to deet the applicable	ate of filing or more to statutory filing re-	(optional) han 90 days after filing quirements, this date	t.) Pursuant to 605,020
record specifies a delay The 90th day after the re	ed effective da cord is filed.	ite, but not ar	n effective time	e, at 12:01 a.m.	on the earlier o
ted		2019			
					
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L	Signature of a me	ember or authorize	d representative of a	member	

Page 3 of 3

Filing Fee: \$25.00