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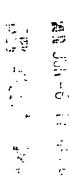
(Requestor's Name)	-
(Address)	-
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(City/State/Zip/Phone #)	_
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(Business Entity Name)	-
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:]
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COVER LETTER

TO:	Registration Sec Division of Cor			E.
cup in	Zer.	Harold Homes 11	,	
SUBJE	CT:	Herold Homes LL	Liability Company	——————————————————————————————————————
				.10
The end	closed Articles of a	Amendment and fee(s) are submit	ted for filing.	و من من
Please i	return all correspo	ndence concerning this matter to	he following:	رمر رمر
		Kaules 9	2.5000	
		ragite	Same of Person	
		Controlle	CS, L+d. Firm/Company	
			Firm/Company	<u>-</u> _
		1005 Team	inal imay Ste 220	
		1000 161111	nal Way Ste. 220 Address	
		_		
		Reno, 1	UV 895≎2 Lity/\$tate and Zip Code	
		E-mail address: (to b	a gontra Hersitd. 10m	<u>ion)</u>
For furt	ther information co	oncerning this matter, please call:	·	
	Kayler	Bishop	at (<u>866</u>) <u>786 - 34</u> Area Code Daytime Te	62
	Name of	Person	Area Code Daytime Te	lephone Number
Enclose	ed is a check for th	e following amount:		
D \$25	i.00 Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	S\$5.00 Filing Fee & Gertified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Divisio P.O. Bo	NG ADDRESS: ation Section to of Corporations ox 6327 ssee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		c		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records.) da Himited Liability Company)			
		5.		
The Articles of Organization for this Limited Liability	Company were filed on $\frac{\partial 4}{\partial 2}/19$	and assigned 🐍		
Florida document number <u>L19000091444</u>		**		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	mited liability company here:			
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	ORESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or regregistered agent and/or the new registered office ad Name of New Registered Agent: New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	the name of the new		
	, Florida	Zip Code		
New Registered Agent's Signature, if changing Register	<u> </u>	inp (ww		
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the register company has been notified in writing of this change	at and agree to act in this capacity. I further as complete performance of my duties, and I am agent as provided for in Chapter 605, F.S. Or red office address, I hereby confirm that the h	familiar with and , if this document is		
	If Changing Registered Agent, Signature of New R	egistered Agent		

If amending a or removed fi	Authorized Person(s) authorized to norm our records:	nanage, enter the title, name, and address of each	person being added
MGR = Ma AMBR = Au	nager thorized Member		
Title	<u>Name</u>	Address	Type of Action
MGR	Patricia H. Yorton		Add
			□ Remove
		Name Change from Victoria Doyot to Patricia H. Yorton	C Change
			Add
			🗆 Remove
			Change
			□ Add
			□ Remove
			_□ Change
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. <u>—</u>	Name	ehenge	MGR	from	Victoria	Deyot	to Patric	ia H. Yorton
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(If an effect <u>Note:</u> If	ive date is listed the date insert		specific and does not me	cannot be bi cet the app	licable statuto	ng or more than		l) g.) Pursuant to 605.0207 (3)(e will not be listed as the
		a delayed el er the record		ate, but	not an effec	tive time, a	at 12:01 a.m	on the earlier of:
Datad	5/3//1	9						
Dated	_/		Kantu :	Bish	horized represe			
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Filing Fee: \$25.00