L19000 177654

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COVER LETTER

TO: Registration Secti Division of Corpo	tions	
SUBJECT:	Buxing Jax Homes LLC Name of Limited Liability Company	
The enclosed Articles of Ar	ndment and fee(s) are submitted for filing.	
Please return all correspond	ice concerning this matter to the following:	
	Nathan Claire	
	Bying Dox Homes LLC	
	2914 Brettungar Dr.	
	Jacksonville FL 32246	
	E-mail address: (to be used for future annual report notification)	M
For further information cond	rning this matter, please call:	
Nathan (on at (Area Code Daytime Telephone Number)	
Enclosed is a check for the I	lowing amount:	
\$25.00 Filing Fee	\$30.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
(ready laid	\$35.00 (additional copy is enclosed	,
Mailing Address:	Street Address: Deviate tion Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Name of the Limited Liability Company as it now app (A Florida Limited Liability Company (A Florida Limited Liability Company	Homes LL	<u>_</u>	
The Articles of Organization for this Limited Liability Company were filed on Florida document number 4 19000 177654	7/08/2019	nd assiદ્	gned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company	here:		
The new name must be distinguishable and contain the words "Limited Liability Company." th	e designation "LLC" or the abbrevial	ion "L.L.	.C."
Enter new principal offices address, if applicable:	•	202	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2020 H	
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• •	· .	2020 HDV 25	hada.
• •		2020 HDV 25 AH	
(Principal office address MUST BE A STREET ADDRESS)		-	<u> </u>

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

Name of New 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.

City

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>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00