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	(Business Entity Name)
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JUN 1 9 2020 S. YOUNG

## **COVER LETTER**

TO: Registration Section Division of Corpo	
SUBJECT:	Big Book of Homes, LLC.
	Name of Limited Liability Company
The analogue Articles of An	nendment and fee(s) are submitted for filing.
	ence concerning this matter to the following:
r lease return an correspond	
	Jallaleddin Botshekan Dehkordi
	Name of Person
1	
	Firm/Company
	3773 OVEGLOOK Do.
į	
	Tallahassee, FL 32311  City/State and Zip Code  J Botshekan @ comcast. net
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further information cond	cerning this matter, please call:
Jallaledd	a polymeti 850 SSQ 1271
130.75 N & K	an Dehlkordi at (850) 559-1271  Area Code Daytime Telephone Number
Enclosed is a check for the f	following amount:
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address:	Street Address: Registration Section
Registration Sec Division of Cor	C
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Big Bo	OOK OF Homes, LEC-	11 - K- B
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number 1900024	9546	gned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designation "LLC" or the abbreviation "L.1	c."
Enter new principal offices address, if applicab	le:	<del>.</del>
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office address on our records, <u>enter the name of the new</u> nere:	registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u>_</u>
t .	. Florida	
	City 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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			□Remove
			□ Change
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	date, if other than the date of filing:
<u>ste:</u> li t	he date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as seffective date on the Department of State's records.
ote: If t scument secord sp	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
ote: If to occument record spirits filed.	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as seffective date on the Department of State's records.  Secifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ote: If to ocument record sp is filed.	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a seffective date on the Department of State's records.

Filing Fee: \$25.00