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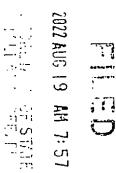
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A. BUTLER NOV - 9 2022

COVER LETTER

Division of Corp	orations		
SUBJECT: H	ome Lande	d LLC	
	Name of Limi	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Toda	D. Chrisp Name of Person	
	Home 1	-anded LLC Firm/Company	<u>.</u>
	1523 Lur	a Ave Fort My	ers, Fl. 33916
		rs, Fl. 3391b City/State and Zip Code	
	home land. E-mail address:	ed 76 a 9 mail. o be used for future annual report notifi	cation)
For further information cor	ncerning this matter, please ca	ill:	
Todd D. (Person Person	at (239) 218 Area Code Daytime	9304 Telephone Number
Enclosed is a check for the	following amount:		
S25.00 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:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

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 OF

, ·)F	5 0
Home Land LL Compa (Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records. Ciability Company)	MI PESWE
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000291900</u> .	were filed on $11 - 26 - 2$	019 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	lity Company," the designation "LLC" 1523 Lura AVE For 1523 Lura AVE For	T Myers F1 33916 (
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1523 Lura Ave	ForT Myers, Fi 33916
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		he name of the new registered
Name of New Registered Agent:	H D Chrise	

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

1523 Lura Ave

Enter Floridu street address

Fort Myers Ft. Florida 33916

Zip Code

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

Title	<u>Name</u>	Address	Type of Action
MGR	Rashonda C Chr	-isp 4856 Archie Lane	□Add
		Fort Myers, Fl. 33905	Remove
			[]Change
			□ Add
			🗆 Remove
			🗆 Change
		······································	🗆 Add
		□Remove	
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		🗆 Add	
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

). If amending .	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
(If an effective Note: If the	te, if other than the date of filing: 8-16-202 (optional) 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 605.0207 (3)(date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
the record spec cord is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated 8	-16-2022
_	Signature of a member or authorized representative of a member
	Todd D (hr 180) Typed or printedname of signee