LZ0000005096

(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number)	
Certified Copies	Certificate	s of Status
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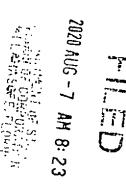
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COVER LETTER

	Registration Se Division of Cor					
SUBJEC		Homebuilders and Rental Pro	perties, LLC			
SUBJEC	·	Name of Lin	nited Liability Company			
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please rett	ırn all correspo	ondence concerning this matter	to the following:			
		Veronica Lacayo				
			Name of Person			
		Tejada Lacayo, P.A.				
			Firm/Company			
		8950 SW 74th Ct., Suite 2	201			
			Address			
		Miami, FL 33156				
		 -	City/State and Zip Code			
		veronica@tlattorneys.com				
		E-mail address: (to be used for future annual report no	tification)		
For further	r information e	oncerning this matter, please c	all:			
Veronica	Lacayo		305 767-2977			
	Name o	f Person		me Telephone Number		
Enclosed i	s a check for th	ne 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)		
	lailing Addres		Street Address:	oction		
Registration Section Division of Corporations		-	Registration Section Division of Corporations			
P	.O. Box 632	7	The Centre of			
T	allahassee, F	FL 32314	2415 N. Monre	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Four Walls Homebuilders and Rental Properties, LLC					
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our reco Liability Company)	ords.)			
The Articles of Organization for this Limited Liability Company Florida document numberL20000005096		2019 and assigned			
This amendment is submitted to amend the following:		8: 23			
A. If amending name, enter the new name of the limited liab	oility company here:	, 			
Four Walls Capital, LLC					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	11027 SW 78 Ct.				
(Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33156				
Enter new mailing address, if applicable:	11027 SW 78 Ct.				
(Mailing address MAY BE A POST OFFICE BOX)	Miami, FL 33156				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new registered			
Name of New Registered Agent: New Registered Office Address:					
	Enter Florida street address				
		Florida			
	City	Zip Code			
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, provided for in Chapter 60,	and I am familiar with and 5, F.S. Or, if this document is			

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>	Address	Type of Action
			□Add
			☐Remove
			□Change
		 .	□Add
			□Remove
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te: If the da	if other than the is listed, the date to inserted in this cetive date on the	s block does ne	ot meet the app	licable statuto	ry filing requi	cinents, this d	al) ing.) Pursuant to 6 ate will not be li	05.020 isted a
cord specific is filed.	es a delayed effec	ctive date, but	not an effective	time, at 12:0	la.m. on the e	earlier of: (b)	The 90th day at	ter the
ted <u>\$ </u>	1/20		_·					
		Signature o	f a niember or au	thorized repres	entative of a me	mber		
		-	_ ,	, .				

Filing Fee: \$25.00