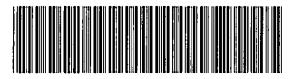
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

	egistration Se ivision of Cor		•	
eun ucea		HOMES LLC		
SUBJECT	: <u></u>	Name of Lim	ited Liability Company	
The enclos	ed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspo	ndence concerning this matter	to the following:	
		FERAY GIRGIN LUES		
			Name of Person	
		-	Firm/Company	
		157 ISLAND WAY		
			Address	
		GREENACRES FL 33413	3	
			City/State and Zip Code	
		feraygirgin@gmail.com	to be used for future annual report notification)	
For further	information co	oncerning this matter, please c		
FERAY G	IRGIN LUES		917 622-7941 at ()	
	Name of	f Person	Area Code Daytime Telephone N	lumber
Enclosed is	s a check for th	ne following amount:		
■ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	0.00 Filing Fee, ertificate of Status & ertified Copy ditional copy is enclosed)
	ailing Addres		Street Address: Pagistration Section	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P	.O. Box 632	7	The Centre of Tallahassee	
T	allahassee. F	FL 32314	2415 N. Monroe Street, St	uite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAMARO HOMES LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appears on our records.) nited Eiability Company)	
The Articles of Organization for this Limited Liability Complete Horida document number L20000030183	pany were filed on 1/24/2020	and assigned
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," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	
		2020 SEC
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	· ·	
		SS
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, enter the r	
agent and/or the new registered office address here.		- ૄ૾ - 5
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	Cirv	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>	Address	Type of Action
MGR	FERAY GIRGIN LUES	157 ISLAND WAY GREENACRES FL 33413	□Add
			□Remove
			■ Change
MGR	MARIA FERAY	157 ISLAND WAY GREENACRES FL 33413	□Add
			■Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			⊡Remove
			□Change
			□Add
			□Remove
		🗆 Change	
			□Add
			□Remove
			Change

11 4111	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
If an et Note:	tive date, if other than the date of filing: [1/23/2020] [Tective 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
e reco rd is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	2/13/2020
	Signature of a member or authorized representative of a member
	·
	FERAY GIRGIN LUES Typed or printed name of signee

Filing Fee: \$25.00