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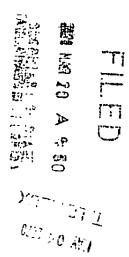
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO:

TO: Registration Sec Division of Corp			
		•	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
	LISA A. BERMUDEZ		
		Name of Person	<del></del>
Division of Corporations  RA. HOMEBUILDERS, LLC.  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  LISA A. BERMUDEZ  Name of Person  Firm/Company  8180 NW 36 STREET STE 318  Address  DORAL, FL. 33178  City/State and Zip Code  LB250517@GMAIL.COM  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  LISA A BERMUDEZ  Name of Person  786  447-4197  Area Code  Daytime Telephone Number  Finclosed is a check for the following amount:  \$\name{\psi}\$ \$25.00 Filing Fee  Certificate of Status  Certificate of Status & Cer			
	8180 NW 36 STREET STI		
		Address	
	DORAL, FL. 33178		· <del></del>
		•	
For further information of			diffication)
		786 447-4197	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status &
		Registration S	
	-		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RA. HOMEBUILDERS, LLC.		<del>-</del>
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compan	ny were filed on <u>08/06/2015</u>	and assigned
lorida document number £20000085841		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lia	ability company here:	
RA. HOME BUILDERS, LLC.	200	Ĵ
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLO" or the ab	reviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	<u> </u>	******
	<u> </u>	
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic	e address on our records, enter the nam	e of the <u>new regist</u>
gent and/or the new registered office address here:		
Name of New Registered Agent:		· 
<del></del>		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	Florida	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	RAFAEL MENA	3600 NW 115TH AVE	□Add
		DORAL, FL 33178	□Remove
	·		■Change
			□Add
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Fa a.4:-	re date, if other than the date of filing:(optional)
n effe	ctive 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 605.02
<u>ite:</u> [ cume	I'the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed nt's effective date on the Department of State's records.
	·
ecord	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
is file	
	April 16 2020
ited _	
	The state of the s
	Signature of a member or authorized representative of a member
	DAGAGI AZ MIGNA
	RAFAEL A/ MENA

Filing Fee: \$25.00