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JUN 1 5 2020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: House 2 Home Realty "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:
MAGY F Applegate Name of Person
160502 Hone Realty" LLC"
15 Ruby Lave Address
Crawfords.11c F132327 City/State and Zip Code
E-mail addless: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (850) 321-4170 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address:

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

ARTICLES OF	ORGANIZATION	20
	OF	7-1 20
Name of the Limited Liability Con	me Realty "LL npany as it now appears on our reco ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	my were filed on 5/4	and assigned
Florida document number <u>L2000119</u> 03	32	0
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	jability company here:	
House2Home	Realty ILC	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	D 07	
	Enter Florida street add	TESS
		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, <u>enter the title, name, and address of each person_being ad or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MgC	Terry L Applegate	15 Rby LANE	□Add
		Crawfordulle, F13232	Kemove
			□Change
			🗆 Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change
			🗆 🗆 Add
			□Remove
			□Change
			DAdd
			□ Remove
			□Change
100 Table 1			🗆 Add
			□Remove
			□(banus

	
Effective d	late, if other than the date of filing:
If an effective <u>Note:</u> If th	e 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 (e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to effective date on the Department of State's records.
e record spo rd is filed.	ecities 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	5/21/2020
	Signature of a member of authorized representative of a member
	Mary F Apole gate Typed or printed name of Signee

Filing Fee: \$25.00