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Y. SCOTT MAR 2 6 2022

COVER LETTER

TO: Registration Se Division of Cor				
770 Énfield	Street, LLC			
SUBJECT:	Name of Lim	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Nancy M Gold			
		Name of Person		
	Alan C Gold PA		40	~ 3
		Firm/Company	<u> </u>	022
	9200 S Dadeland Blvd, Sto	e 208	RETA	HIL 2022 HAR 17
		Address	ある。	(magain
	Miami, FL 33156		SSEE.	PM 3: 06
	nancy@acgoldlaw.com	City/State and Zip Code	FL	: 06
		to be used for future annual report not	ification)	
For further information e	oncerning this matter, please c	all:		
Nancy M Gold		305 667-0475		
Name o	f Person		ne Telephone Number	_
Enclosed is 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)	Section 1 \$60.00 Filing I Certificate of Certified Copy (additional copy in the copy in th	Status & y
Mailing Addres		Street Address:		
Registration S Division of C		Registration Se Division of Co		
P.O. Box 632		The Centre of	•	
Tallahassce, l	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

770 Entield Street, LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{3/3/2021}{1}$ and assigned Florida document number ______L21000103903 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SPEIDELL HOMES LILLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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>	<u>Address</u>	Type of Action
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			□Remove
			Change
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ective date, if other than the effective date is listed, the date in	e date of filin ; ast be specific and	g: I cannot be prior t	o date of filing or	niore than 90 day	optional) safter filing.) l	^o ursuant i	to 605.02 ⁶
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