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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BILZIN SUMBERG BAENA PRICE & AXELROD LLP

Account Number : 075350000132 Phone : (305)374-7580 Fax Number : (305)351-2122

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNED SET LLC LS-VEH EAGLE CREST LLC

Certificate of Status	1
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Page Count	03
Estimated Charge	\$60.00

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	EH FAGLE CREST LLC	
(Name of the Limited Liabit (A Floric	lity Company as it now appears on our records.) da Limited Liability Company)	'
The Articles of Organization for this Limited Liability (Florida document number <u>L21000163597</u>	Company were filed on 04/08/2021	and assigned
This amendment is submitted to amend the following:		2021 SEL TAL
A. If amending name, <u>enter the new name of the lin</u>		FILL 2021 JUN 23 TALLAHAS
The new name must be distinguishable and contain the words "Li	mited 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 ADD	ORESS)	02 02 02
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here	ed office address on our records, <u>enter t</u> :	he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida sirect address	
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	Ciry	2.17 5 000

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

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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	Landsca Homes- WAB 2 LLC	660 Newport Center Drive Suite 300	■Add
		Newport Beach, CA 92660	[]Kemove
			[]Change
MGR	Mercedes Premier Homes, LLC	660 Newport Center Drive Suite 300	C) Add
	Newport Beach, CA 92660	Remove	
		[]Change	
			[] Add
			□Remove
			[]Change
			□Add
			[]Remove
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(If an ci	ive date, if other than the date of filing: June 18, 2021 (optional fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. If the date inserted in this block does not meet the applicable statutory filing requirements, this datent's effective date on the Department of State's records.	ng) Pursuant to 605.0	207 (3 I as th
the rece	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) led.	The 90th day after	the
Dates	June 16 2021		
	/s/Franco Tenerelli		
	/s/Franco Teneretti Signature of a member or authorized representative of a member		
	Franco Tenerelli		

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