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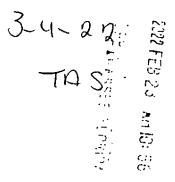
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## **COVER LETTER**

TO: Registration Section Division of Corporations				•
aun ma		ATED HOMES LLC	•	<b>♥</b> 2 3 4 <sup>44</sup>
SUBJEC	T:,	Name of Lim	ited Liability Company	
The encio	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
		RICHARD CROUSE, ENI	ROLLED AGENT	
			Name of Person	
		GVC FINANCIAL INC		
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		978 DOUGLAS AVE STE	102	
			Address	<del>.</del>
		ALTAMONTE SPRINGS.	FL 32714	
			City/State and Zip Code	<del></del>
		RICHARDCROUSE@GVC		
			to be used for future annual report not	ification)
For furth	er information c	oncerning this matter, please ca	all:	
RICHARD CROUSE		407 331-0678 at ( )		
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.6	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S Division of C P.O. Box 632	Section forporations	Street Address: Registration Se Division of Co The Centre of	rporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REGENERATED HOMES LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records, Liability Company)	.)
The Articles of Organization for this Limited Liability Company	were filed on 02/04/2022	and assigned
Florida document number L22000061024		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)		, 22 {
		To the
		7. 2
Enter new mailing address, if applicable:		
• • • • • • • • • • • • • • • • • • • •		5
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	
	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, enter the title, name, and address of each person being added \*or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	BILLY BRUCE	611 RIOMAR AVE	<b>=</b> Add
		ORLANDO, FL 32828	□Remove
		<del></del>	□Change
			□Remove
			☐ Debange
			Remove  ☐ Change
			🗀 Add
		<del></del>	Remove
		<del></del>	
-			□Add
			□Remove
			☐ Change
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ective date, if other than the effective date is listed, the date must e: If the date inserted in this blument's effective date on the De	ock does not meet the applicabl	date of filing or more than 90 e statutory filing require	(optional)  Odays after filing.) Pursuments, this date will no	ant to 605.02 of be listed :
cord specifies a delayed effective filed.	e date, but not an effective time	, at 12:01 a.m. on the ear	clier of: (b) The 90th	day after th
ed Februrary 17	, 2022			
Med	Signature of a member or authoriz			
<del></del>	C:			