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CHD III	ZHOMES I	REAL ESTATE LLC	••	_ we've', disper
SUBJE.	C1:	Name of Lim	ited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Gilbert Zaldivar Sanchez Name of Person ZHONIES REAL ESTATE LLC Firm/Company 7520 PRESTON HWY Address LOUISVILLE, KY 40219 City/State and Zip Code micasa.gilbert@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Area Code Dayting Telephone Number				
Please r	eturn all correspo	ndence concerning this matter	to the following:	
	Division of Corporations ZHOMES REAL ESTATE LLC Name of Limited Liability Company the enclosed Articles of Amendment and fee(s) are submitted for filing. the enclosed Articles of Amendment and fee(s) are submitted for filing. Gilbert Zaldivar Sanchez Name of Person ZHOMES REAL ESTATE LLC Firm/Company 7520 PRESTON HWY Address LOUISVILLE, KY 40219 City/State and Zip Code micasa.gilbert@gmail.com E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: 502 641-6623			
			Name of Person	
		ZHOMES REAL ESTATE	ELLC	
Firm/Company			*****	
		7520 PRESTON HWY		
			Address	
		LOUISVILLE, KY 40219	Tand fee(s) are submitted for filing. Cerning this matter to the following: Zaldivar Sanchez Name of Person ES REAL ESTATE LLC Firm/Company RESTON HWY Address VILLE, KY 40219 City/State and Zip Code Gilbert@gmail.com E-mail address: (to be used for future annual report notification) his matter, please call: 302 641-6623 at () Area Code Daytime Telephone Number g amount: 10 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certificate of Status	
		micasa eilhert@email.com	City/State and Zip Code	
	7520 PRESTON HWY Address LOUISVILLE, KY 40219 City/State and Zip Code micasa.gilbert@gmail.com E-mail address: (to be used for future annual report notification)			
For furt	her information c	oncerning this matter, please c	all:	
•	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$25	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Mailing Address Registration S		Street Address: Registration Sec	tion

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

FILED 2022 JUN 24 PM 1:13

ZHOMES REAL ESTATE 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 May 26, 2022 and assigned Florida document number 1.22000245162 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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.

City

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 added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Gilbert Zaldivar Sanchez	7520 Preston Hwy Louisville. KY 40219	= Add
			□Remove
			□Change
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	date of filing:	(optional) r more than 90 days after filing.) Pursuant to the ling requirements, this date will not be listed.	605,0207 (listed as t
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