## 122000586171

(Requesto	or's Name)
(Address)	
(Address)	<u>.                                    </u>
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documer	nt Number)
Certified Copies	Certificates of Status
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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations		
	LL HOMES LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Name of Limited Liability Company  sclosed Articles of Amendment and fee(s) are submitted for filing.  return all correspondence concerning this matter to the following:    DOUGLAS A HILL		
Please return ail correspo	ondence concerning this matter	to the following:	
	DOUGLAS A HILL		
		Name of Person	
	<del></del>	Firm/Company	<del></del>
	4230 SIDERNO CT		
		Address	<del></del>
	NAPLES, FL 34119		
		•	
	<u></u>		
For further information of		•	fication)
DOUGLAS A HILL			
Name o	f Person		e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Registration !	Section Corporations 27	Registration Sec Division of Cor The Centre of T	porations allahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DOUG HILL HOMES LLC	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	y appears on our records.) mpany)
The Articles of Organization for this Limited Liability Company were filed	on 06/24/2022 and assigned
Florida document number L22000286171	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	any here:
CANNON HILL BUILDERS LLC	
The new name must be distinguishable and contain the words "Limited Liability Company	y," 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:	<b>2024</b> SEC
(Mailing address MAY BE A POST OFFICE BOX)	AUC.
<u></u>	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
B. If amending the registered agent and/or registered office address on	our records, enter the name of the new registere
agent and/or the new registered office address here:	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	
Er	nter 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

Florida

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	LUCAS E CANNON	421 16TH ST NE	<b>∃</b> Add
		NAPLES, FL 34120	□Remove
			□Change
	<del></del>		□Add
			□Remove
			Change
		<u> </u>	□ Add
		<del></del>	□Remove
			□Change
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ffective date, if other than the data an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Department.	e specific and cannot b k does not meet the	applicable statut	iling or more than 90 d ory filing requireme	_ <b>(optional)</b> ays after filing.) Pursents, this date will r	uant to 605.020 not be listed a
record specifies a delayed effective of is filed.	late, but not an effec	ctive time, at 12:	01 a.m. on the earlie	er of: (b) The 90th	h day after the
	2024				
AUGUST 22ND					
ated	Jhil gnature of a member of			. <u>.                                   </u>	