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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043

Phone

: (800)342-9856

Fax Number

: (800)354-3381

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

Email A	Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HAPPY HOMES DELRAY BEACH LLC

Certificate of Status	0
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

No. 1001 F. 2

HAPPY HOMES DELRAY BEA			
(Name of the Lir	nited Liability Company as it now apport (A Florida Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited	Liability Company were filed on C	01/12/2023	and assigned
Florida document number L23000014954	,		***********************************
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if appl	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
			
Enter new malling address, if applicable:			
Mailing address MAY BE A POST OFFICE			
B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office address on our	records, enter the name	of the new register
			•••
Name of New Registered Agent:	BARBARA BUNIOWSKA		
New Registered Office Address:			7
_	Enter Flo	rida street address	6
		, Florida	<u>. လ</u>
	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.

/s/ Barbara Buniowska
If Changing Registered Agent, Signature of New Registered Agent

If amenoning authorized rerson(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

Title	<u>Name</u>	Address	Type of Action
MGR	BARBARA BUNIOWSKA	2953 WYNSUM AVENUE	≅Add
		MERRICK, NY 11566	□Remove
		<u></u>	□Change
AMBR	BARBARA BUNIOWSKA	2953 WYNSUM AVENUE	⊟ Add
		MERRICK, NY 11566	□Remove
			□ Change
AMBR	ERIC GOLDSTEIN	2953 WYNSUM AVENUE	
		MERRICK, NY 11566	
			□Change
	•		🗆 Add
			□Remove
			□Change
··			□Add
		<u> </u>	□Remove
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Note:	ve date, if other than the date of filing: (optional) (it we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) If the date inscrized in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cut's affective date on the Department of State's records.
f the rec b) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	November 21, 2023.
	Signature of a member or authorized representative of a member
	Parhaca Runiowska. Typed or printed name of signee

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