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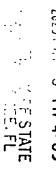
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COVER LETTER

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CIID IE		T FIFTY FIVE LLC		
SUBJEC	, I : <u> </u>	Name of Lim	nited Liability Company	•
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Alexander Andrade		
			Name of Person	_
		HOMES AT FIFTY FIVE	LLC	
			Firm/Company	_
		9773 1st st ne		
		<u> </u>	Address	_
		St Pete, Fl. 33702		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	_
		thehomesllc@gmail.com		
		E-mail address: ((to be used for future annual report notification)	•
For furth	er information c	oncerning this matter, please c	eall:	
Alexand	er Andrade		216 2824930 at ()	
	Name o	f Person	Area Code Daytime Telephone Numb	er Er
Enclosed	is a check for th	ne following amount:		
\$25 .	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Section	
Division of Corporations		orporations	Division of Corporations	
	P.O. Box 632		The Centre of Tallahassee	010
	Tallahassee, I	TL 32314	2415 N. Monroe Street, Suite	910

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LED

HOMES AT FIFTY FIVE LLC	iability Company as it now appears on our recolorida Limited Liability Company)	2023 H4Y -3 PM 4: 09			
(Name of the Limited L	iability Company as it now appears on our rec	ords,)			
(// [lorida Emitted Liabrity Company)	ANY OF STATE			
The Articles of Organization for this Limited Liabil	ity Company were filed on 04/05/2023	and assigned			
Florida document number 123000169379		_			
This amendment is submitted to amend the following	ng:				
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 "I	LC" or the abbreviation "L.L.C."			
-					
Enter new principal offices address, if applicable					
(Principal office address MUST BE A STREET A	DDRESS)				
	-				
Enter new mailing address, if applicable:		<u> </u>			
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>				
	_				
B. If amending the registered agent and/or regis agent and/or the new registered office address he		ter the name of the new registered			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	,	Florida			
	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 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	Alexander Andrade	9773 1st st ne			
		St Petersburg FL 33702	□ Remove		
			Change		
			□Add		
			□Change		
			□Add		
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			Change		
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ective date, if other than a effective date is listed, the date	the date of fili	ng:	o asias ta da	ta of filing on		(optiona		to 60	S 020'
te: If the date inserted in the	is block does no	t meet the	applicable						
cument's effective date on the	e Department of	i State's re	cords.						
cord specifies a delayed effe	ective date, but n	ot an effec	tive time	at 12:01 a m	on the ear	ier of: (b)	The 90th	day afti	er the
s filed.	out of the same of	w an ence		ut 12.01 u.i.		(0)	1110 70111	day and	or are
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April 29		_ , 2023	 .	,					
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