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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 Phone : (561)214-8442 Fax Number

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JDA HOMES LLC

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T. LEMIEUX

ARTICLES OF AMENDMENT TO , . ARTICLES OF ORGANIZATION OF

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	JDA	HOMES LL	С				•		
	(Name of the Limited Liabili (A Florid			appears o	n our recor	<u>ds.</u>)		_	
	les of Organization for this Limited Liability C	Company w	ere filed	on <u>04/20</u>	/2023		and	d assign	ed
orida do	ocument number L23000197779	.							
nis amei	ndment is submitted to amend the following:								
. If am	ending name, enter the new name of the lim	ited liabili	ty compa	ıny here:					
ie new na	me must be distinguishable and contain the words "Lin	nited Liability	Company.	" the desig	mation "LL	C" or the	abbreviatio	n "L.L.C	."
nter nev	v principal offices address, if applicable:								
rincipa	office address MUST BE A STREET ADDI	RESS)			,				
nter ne	v mailing address, if applicable:						·		
1ailing	address MAY BE A POST OFFICE BOX)					-			
						•			_
. If ame	ending the registered agent and/or registere	d office ad	dress on	our reco	rds, ente	r the na	sme of the	new re	egiste
	lor the new registered office address here:								
							1	~~	
j	Name of New Registered Agent:	<u> </u>	·					123 t	
j	New Registered Office Address:								
	-		Eni	ter Florida	street addre	(EC		9	
					, F	lorida _.		<u></u>	
.			City				Zip (WI6	
ew Regi	tered Agent's Signature, if changing Registere	<u>:a Agent:</u>					₹ħ.T	0	

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>	Name	Address	Type of Action
VP	JUAN PEDRO ALDUNCIN	11501 OLD CUTLER ROAD	■Add
			□Remove
		CORAL GABLES, FL 33156	□Change
			□Add
			□Remove
			☐Change
			□ Add
			Remove
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			Remove
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	it be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to ock does not meet the applicable statutory filing requirements, this date will not be	
record specifies a delayed effective is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	after the
May 16th	2023	
-	Signature of a member or authorized representative of a member	-
	Erin Saville, Attorney-In-Fact	
	initiourine, moine, in the	

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