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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HOMMERDING ADVISORS LLC

Account Number : I20220000171 Phone : (954)532-3842 Fax Number : (954)532-3847

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

Email Address: CORPORATE @ EDGLE-TAX COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **ENCORE VACATION HOMES LLC**

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JUL 23 2024

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

TO:

COVER LETTER

ENCO SUBJECT:	ORE VACATION HOMES LLC		
<u></u>	Name of Li	mited Liability Company	
	ALVIN HOMMERDING	1	
Division of Corporations ENCORE VACATION HOMES LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: ALVIN HOMMERDING Name of Person EAGLE TAX Firm/Company 5493 WILES ROAD SUITE 105 Address COCONUT CREEK FL 33073 Cuy/State and Zip Code CORPORA FE@EAGLE-TAX.COM E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: LLVIN HOMMERDING Name of Person At Code Daytime Telephone Number nelosed is a check for the following amount: \$\frac{352-3842}{4\text{rea} \text{Code}} \frac{360.00 \text{Filing Fee} & Certified Copy (additional copy is enclosed)}{(additional copy is enclosed)}			
	EAGLE TAX		
		Firm/Company	
	5493 WILES ROAD SUI		
		Address	
	COCONUT CREEK FL	33073	
	CORPORA FE@EAGLE	,	
	·		ication)
For further informat	ion concerning this matter, please o	all:	
ALVIN HOMMER			
No	inte of Person	Area Code Daytime	: Telephone Number
Enclosed is a check	for the following amount:		
S25 00 Filing Fe	-	Certified Copy	Certificate of Status & Certified Copy
<u>Majling Aç</u>	idress;	<u>Street Address:</u>	

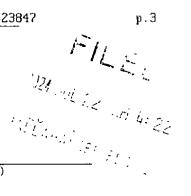
Registration Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ENCORE VACATION HOMES 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 Compan	y were filed on 06/12/2023	and assigned
Florida document number L23000284050		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial	bility Company," 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:		
(Mailing address MAY BE A POST ()FFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	·\$
		orida
	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>	Name	Address	Type of Action
AMBR	JORGE MARTINS	5504 LAKE TERN CT	
		COCONUT CREEK FL 33073	
			□Change
AMBR	LELIANE MARTINS	5504 LAKE TERN CT	
		COCONUT CREEK FL 33073	■Remove
		-	URemove T
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			□Add
			Change
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factive data if other than th	e date of filing:		
an effective date is listed, the date m	ist be specific and cannot be prior to date	of filing or more than 90 days after filing) Pursuant to 605	.0207
<u>lote:</u> If the date inserted in this to ocument's effective date on the locument.	block does not meet the applicable su	atutory filing requirements, this date will not be liste	ed as
and	population of State 3 feeding.		
record specifies a delayed effecti	ve date, but not an effective time, as	12:01 a.m. on the earlier of: (b) The 90th day after	l
is filed.	The same of the street of the	12.01 a.m. on the cather of (5) The 90th day after	ruie
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ated	2024		
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Typed or printed name of signee