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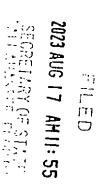
	_	
(Requestor's Name)		
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PICK-UP WAIT	MAIL	
(Business Entity Name)		
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Certified Copies Certific	cates of Status	
Special Instructions to Filing Officer.		
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SEP 1 @ 2023		

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: AMR Homes LLC			
Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Annihe Richards Name of Person	_		
AMR Homes LLC Firm/Company			
2598 É. Sunrise Blud Suite 2104 Address			
North Landerdale Fl 33304. City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Annolne Dichards at (954) Name of Person-	723 0480 Area Code & Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

\$25 Filing Fee

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company:AMR_ HomesLL	- C
2. (a)	_	S E. Sunrise Blud
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	suite 2104 suits	2104
	Fort Laiderdgle Fl 33304 Fort	Landerdale, F1 33301
	Date of filing/registration in Florida L2300 4.	0 320 225
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	Anothe Lithards	•
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State	8EC 2023
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	E1 2023 AUG 1 SECRETA!
	74	11-12
	North Landerdale FL 33068	OF STA
(b)	Annohe Richards	<u> </u>
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
	2598 E. Sunise Blvd NEW Registered Office Address:	-
	Suite 2104	
	30110 2109	-
	Fort Lauderdale FL 33304	-
change agent was/w	imited liability company is not organized under the laws of the State of Flore or changes are made, the Florida street address of the registered office and will be identical. Or, in the case of a Florida limited liability company, it is are authorized by an affirmative vote of the members of the limited liability considers of organization or the operating agreement of the limited liability considers.	I the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in
1	Annot	Printed or typed name of signee
_		
provis the ob- to mer	by accept the appointment as registered agent and agree to act in this cape ons of all statutes relative to the proper and complete performance of my a igations of my position as registered agent as provided for in Chapter 605 by reflect a change in the registered office address. I hereby confirm that the first in writing of this change.	icity. I further agree to comply with the huties, and I am familiar with and accept , F.S. Or, if this document is being filed he limited liability company has been
Signati	re of Registered Agent	