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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Sec Division of Corp					
	Seniors LLC				
SUBJECT:	Name of Limi	ted Liability Company			
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Regenia Herring				
		Name of Person		_ _	
		Firm/Company			
	4573 SW Darlington St			2021 3EI	
		Address		2024 JAH 22 SECRETAN TALLAN	e ·
	Port St Lucie, FL 34953			22	•
	regeniaherring@gmail.com	City/State and Zip Code		PH 2: 42	:
	E-mail address: (to be used for future annual report	notification)	: 1-2	
For further information c	oncerning this matter, please ca	all:			
Regenia Herring		561 662-154 at ()	2		
Name o	f Person		ytime Telephone Numb	er	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	Filing Fee, cate of Status & ed Copy nal copy is enclosed)	
Mailing Addres		Street Address			
Registration S Division of C		Registration Division of	Section Corporations		
P.O. Box 632			of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Homes for Seniors LLC	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.23000364864	were filed on $\frac{08/03/2023}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
Grands Village ALF LLC	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	2022
	ACRE J.
	2
	2
Enter new mailing address, if applicable:	City and City
(Mailing address MAY BE A POST OFFICE BOX)	100 N 137
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter 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	<u>:</u>
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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	Randolph II. Scott	4573 SW Darlington St, Port St Lucie, FL 34953	= Add
			□Remove
			□Change
MGR	Tiffany L. Scott	6341 Topsail Dr, West Palm Beach, FL 33413	= A dd
			Remove
		ター マロ マロ マロ マロ マロ マロ マロ マロ マロ マロ マロ マロ マロ	- Change:
			□ I⊠Add
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fective date, if other than the date of filing:	optional) ior to date of filing or more than 90 days after filing.) Pursuant to 605.020
ote: If the date inserted in this block does not meet the app	licable statutory filing requirements, this date will not be listed a
cument's effective date on the Department of State's recor-	us.
ecord specifies a delayed effective date, but not an effective	e time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	
, January 16 2024	
ited	·
(10gem Herry	