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	(City/State/Zip/Phone #)	
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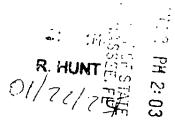
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NAME: HOMESAWAIT FLORIDA LLLC

TYPE OF FILING: AMENDMENT

COST: 25.00

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

Registration Section Division of Corporations

	nit Florida I LLC		
SUBJECT:	Name of Lin	nited Liability Company	
	Amendment and fee(s) are sul	_	
·	Xing Ma	·	
		Name of Person	
	Homesawait Florida I LL	C	
		Firm/Company	
	14622 Ventura Blvd #102	-756	
		Address	
	Sherman Oaks, CA 91403		[1]* [3]*
	-	City/State and Zip Code	
	helen@homesawait.com		· .
	E-mail address:	(to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	rall:	in or
Xing Ma		949 5187936 at ()	STAT S.F.L
Name c	of Person	Area Code Daytim	e Telephone Number 📅 🚨
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration : Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(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 Company were filed on September 15, 2023	Homesawait Florida 1 LLC		
Florida document number L23000430025 This amendment is submitted to amend the following: 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 "LLC" or the abbreviation "LLC." 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 OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	(<u>Name of the Limited Liability Comp</u> (A Florida Limited	oany as it now appears on ou Liability Company}	r records.)
This amendment is submitted to amend the following: 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 "LLC" or the abbreviation "LLC." 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 OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address		y were filed on Septembe	r 15, 2023 and assigne
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 "L.L.C." 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 OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address	Florida document number L23000430025		
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Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX	Enter new principal offices address, if applicable:		
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Name of New Registered Agent: New Registered Office Address: Enter Florida street address	Staning dadress MAT BE A POST OF FICE BOX		
New Registered Office Address: Enter Florida street address		address on our records.	, enter the name of the new re
Enter Florida street address	Name of New Registered Agent:		
	New Registered Office Address:	Enter Florida stree	et address
City Zip Code			
			, Florida Zip Code

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. Thereby confirm that the limited liability company has been notified in writing of this change.

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

Title	<u>Name</u>	Address	Type of Action
AMBR	Hecheng LLC	14622 Ventura Blvd #102-756	□Add
		Sherman Oaks, CA 91403	≣Remove
		-	□Change
AMBR	Earthstone Property Inc	14622 Ventura Blvd #102-756	≣ Add
		Sherman Oaks, CA 91403	□Remove
			Change
			C)Add
			□Remove
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cord specifies a delayed effecti s filed.	ze date, but not an effective tim	e, at 12:01 a.m. on the ea	rlier of: (b) The 90)th day a:	fter the
s med.					
ed	. 2024	_ •			
	Signature of a member of author	2~			

Filing Fee: \$25.00