



Office Use Only



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COVER LETTER

Registration Section

TO:

Division of Cor	rporations		
	estyle Homes LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Emily R. Arena		
		Name of Person	· · · ·
	Arena Lifestyle Homes L	LC	
		Firm/Company	
	10565 Zigler Avenue		
		Address	
	Hastings, FL 32145		
	arenalifestylehomes@gmai	City/State and Zip Code	
	•	to be used for future annual report no	otification)
For further information c	concerning this matter, please c	all:	
Jasmin A. Ezelle		904 2522877	
Name c	of Person	at () Area Code Dayti	ime 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)
<u>Mailing Addre</u> Registration		Street Address: Registration S	Section
Division of C	Corporations	Division of Co	orporations
P.O. Box 632 Tallahassee.		The Centre of 2415 N. Monr	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Arena Lifestyle Homes LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our reco liability Company)	rds.)		
The Articles of Organization for this Limited Liability Company	were filed on	and assigned		
Florida document number 1.24000143938				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LI	,C" or the abbreviation "L.L,C."		
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)		2024 HAY		
				
		-2 [
Enter new mailing address, if applicable:		SSS 3 M		
(Mailing address MAY BE A POST OFFICE BOX)		ms e		
		18 AE		
B. If amending the registered agent and/or registered office a	ddress on our records, <u>ente</u>	er the name of the new regis		
gent and/or the new registered office address here:				
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street addr	ess		
		Florida		
	Cuy	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 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
MBR	Emily R Arena		□ Add
			□Remove
		10565 Zigler Avenue Hastings, FL 32145	= Change
MBR	Jasmin A Ezelle		🗆 Add
			□Remove
		22 Fremont Avenue Saint Augustine, FL 32095	≣ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

cective date, if other than the date of filing: 03/25/2024 (optional) reflective date is listed, the date must be specific and cannot be prior to due of filing or more than 90 days after filing.) Parsuant to 60/5/9207 etc. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as fument's effective date on the Department of State's records. second specifies a delayed effective date, but not an effective time, at 12:01 a.m., on the earlier of: (b) The 90th day after the stiled. April 24 2024 324 324 324 324 335 gnature Day member or authorized representative of a member	<u> </u>	f the Authorized Person Jasmin A Ezelle from DPS to MBR
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