24000304571

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
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Account#: I20000000088
If there are any issues
please contact Cheyanne at
850-202-1882

| Date: | 11/14/2024 | |
|--------------|-----------------------------------|----------------------|
| | Cheyanne Davis | _ |
| Reference #: | 2559081 | _ |
| Entity Name: | VIZCAYA HOMES | GROUP REALTY LLC |
| ☐ Article | es of Incorporation/Authorization | to Transact Business |
| ✓ Amen | dment | |
| Chang | ge of Agent | |
| Reins | tatement | |
| Conve | ersion | |
| ☐ Merge | er | |
| Dissol | lution/Withdrawal | |
| ☐ Fictitio | ous Name | |
| Other | | |
| | | |
| Authorized A | mount: \$25.00 | |
| Signature: | Ohyma Paine | |

P: 800.221.0102

F: 800.944.6607

COVER LETTER

'TO: Registration Section

| Division of Cor | porations | | |
|--------------------------------|--|---|--|
| | HOMES GROUP REALTY I | .LC | |
| SUBJECT: | Name of Lin | ited 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: | |
| | BRIAN BELT | | |
| | - | Name of Person | |
| | ACEVEDO BELT, P.A. | | |
| | <u> </u> | Firm/Company | |
| | 1441 BRICKELL AVENU | JE, SUITE 1400 | |
| | | Address | |
| | MIAMI, FL 33131 | | |
| | | City/State and Zip Code | |
| | brian@acevedobelt.com F-mail address: (| to be used for future annual report n | otification) |
| For further information c | oncerning this matter, please c | | |
| BRIAN BELT | | 305 396-4771 | |
| Name o | f Person | at () Area Code Dayt | ime Telephone Number |
| 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) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address Registration S | | Street Address: Registration S | Section |
| Division of C | Corporations | Division of C | orporations |
| P.O. Box 632 Tallahassee, l | | The Centre of 2415 N. Mon | roe Street, Suite 810 |

Tallahassee, FL 32303

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

FILED

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VIZCAYA HOMES GROUP REALTY LLC

AES GROUP REALTY LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited Liability Company)

| The Articles of Organization for this Limited Liability Company | were filed on JULY 11, 2024 | and assigned |
|---|---|---|
| Florida document number L24000304571 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | |
| BAYROCK HOMES REALTY LLC | | |
| The new name must be distinguishable and contain the words "Limited Liabil | ity Company," the designation "LI | LC" 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 a agent and/or the new registered office address here: | nddress on our records, <u>ente</u> | er the name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| New Registered Office Address. | Enter Florida street addr | ess |
| | . i | Florida |
| | Cuy | Florida Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | | |
| I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance of my duties, orovided for in Chapter 605 | and I am familiar with and i. 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 |
|--------------|-------------|--------------|----------------|
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| fective date, if other than the dan effective date is listed, the date must bote: If the date inserted in this blockerment's effective date on the Dep | ate of filing: e specific and cannot k does not meet the | e applicable stati | | | ng.) Pursu | | |
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Filing Fee: \$25.00