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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
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Certified Copies	_ Certificates	of Status
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COVER LETTER

	gistration Se vision of Cor			
SHE IECT	Homevesto	rs Capital LLC		
SUBJECT	·	Name of Lim	ited Liability Company	
				•
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ondence concerning this matter	to the following:	
		Syed Raza		
			Name of Person	
		Homevestors Capital LLC		
			Firm/Company	
		1540 INTERNATIONAL	PKWY STE 2000	
			Address	
		LAKE MARY, FL 32746		
			City/State and Zip Code	
		sgraza@pm.me	·	
			to be used for future annual report not	ification)
For further	information c	oncerning this matter, please ca	all:	
Syed Raza			813 300-3126	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is	a check for th	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)
	ailing Addres		<u>Street Address:</u> Registration Sc	ection
Đ	ivision of C	Corporations	Division of Co	-
	O. Box 632 allahassee, l		The Centre of 2415 N. Monro	Lallahassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

riomevestors Capital LLC	
(<u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili	it now appears on our records.) 11 File C: 22
The Articles of Organization for this Limited Liability Company were	e filed on September 12, 2024 and assigned
lorida document number 1.24000408060	
ioraa document number	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
t. If amending hame, enter the new hame of the nanted hamilton	tompany nere.
he new name must be distinguishable and contain the words "Limited Liability Co	"the designation of LC" as the abbreviation of LC"
ne new name must be distinguishable and contain the words. Extrated Erabinity Co	originity the designation (E.C. of the above viation (E.C.)
Enter new principal offices address, if applicable:	e 53
Principal office address MUST BE A STREET ADDRESS)	: 8
_	
Inter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	72 12
THIRDING UNDERSONAL DE ATOST OTTICE DOAY	
3. If amending the registered agent and/or registered office addre	ess on our records, <u>enter the name of the new regi</u>
gent and/or the new registered office address here:	
·	
Name of New Registered Agent:	
New Registered Office Address:	P. a. Ph. A. L. a. a. A. L. a.
	Enter Florida street address
	, Florida
	City 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 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	Name	<u>Address</u>	Type of Action
MBR	RIVER BEND LAND TRUST LT.	1540 INTERNATIONAL PKWY, STE 2000	□Add
		LAKE MARY, FL 32746	■Remove
		·	□Change
	· · · · · · · · · · · · · · · · · · ·		□Add
			□Remove
			□Change
	·		🗆 Add
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