## 124000436947

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SECTION 13 PH 2:

## **COVER LETTER**

	gistration se vision of Cor				
A. 11. 1. 1. 2011		S USA, LLC			
SUBJECT	:	Name of Lim	ited Liability Company	<del></del>	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.		
		ndence concerning this matter			
		ROSA SALDARRIAGA			
			Name of Person		
		SAGA TAX & ACCOUN	TING OFFICE		
		· <del></del>	Firm/Company		
		6611 PARK AVE APT.3E	3		
			Address		
		WEST NEW YORK, NJ 0	7093		
		SALDA15@OUTLOOK.C	City/State and Zip Code OM		
			to be used for future annual report noti	fication)	
For further	information e	oncerning this matter, please c	all:		
ROSA SA	LDARRIAGA		201 3282-2144 at ()		
	Name o	f Person	Area Code Daytim	e Telephone Number	
Enclosed is	a check for th	ne following amount:			
<b>■</b> \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	
R	ailing Addres	Section	Street Address: Registration Se		
Division of Corporations			Division of Corporations		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BH HOMES USA, LLC			
(Name of the Limite	ed Liability Compan A Florida Limited Li	y as it now appears on our record ability Company)	<u>(s.)</u>
the Articles of Organization for this Limited Li		were filed on	and assigned
lorida document number L24000436947	<del></del> -		
his amendment is submitted to amend the follo	wing:		
. If amending name, enter the new name of	the limited liabil	ity company here:	
N/A			
he new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company," the designation "LLC	or the abbreviation L.L.C."
nter new principal offices address, if applica	able:	N/A	74 107
Principal office address MUST BE A STREET ADDRESS)			$\frac{1}{\omega}$
			1 -
Inter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE I	ROX)		<u> </u>
	<u> </u>		
. If amending the registered agent and/or re	0	ddress on our records, <u>enter</u>	the name of the new regi
gent and/or the new registered office addres	s here:		
Name of New Registered Agent:	N/A		
<del></del>	N/A		-
New Registered Office Address:		Enter Florida street addres	55
		ורצ	
		, Fl	Orida 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Jacson S Romero Saldarreaga	241 Hickory Lane Drive, Mount Holly, NC 28120	<b>=</b> Add
			□Remove
			□Change
			🗀 Add
			□Remove
		<del></del>	□Change
		<del>.</del>	□Add
			□Remove
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			□Remove
			□Change

Effective date, if other than the date of filing:  [aptional]  [aptional]  [aptional]  [aptional]  [an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 603.0207  [Anterior of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  [and the date of the date of the specific and					
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Tason Skomenas		date, but not an effectiv	/e time, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
Tason Skinneras  Signature of a member or authorized representative of a member	November 6	2024	·		
Signature of a member or authorized representative of a member	4	<0 <			
		Vitimena)			

Filing Fee: \$25.00