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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

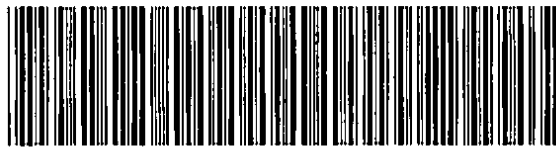
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WRI Property Managment, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susanne McMurry

Name of Person

RESICAP

Firm/Company

3630 Peachtree Road NE Ste 1500

Address

Atlanta GA 30326

City/State and Zip Code

jgoodman@rcmre.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Goodman

Name of Person

at ( <sup>770-598-5118</sup> )

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

### Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: WRI Property Management, LLC

Enter new principal office address, if applicable: \_\_\_\_\_

(Principal office address  
MUST BE A STREET ADDRESS)

3630 Peachtree Road NE Ste 1500

Atlanta GA 30326

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address  
MAY BE A POST OFFICE BOX)

3630 Peachtree Road NE Ste 1500

Atlanta GA 30326

2. The Florida document number of this limited liability company is: M13000001409

3. Jurisdiction of its organization: Georgia

4. Date authorized to do business in Florida: 03/05/13

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: ResiHome, LLC  
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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** \_\_\_\_\_  
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 Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

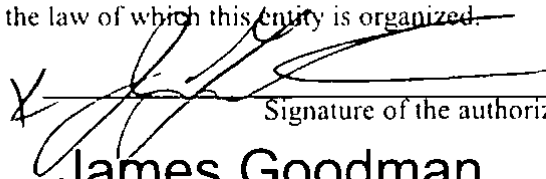
\_\_\_\_\_

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input checked="" type="checkbox"/> Add
_____	_____	_____	<input checked="" type="checkbox"/> Remove
_____	_____	_____	<input checked="" type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the  
aforementioned amendment(s), duly authenticated by the official having custody of records in the  
jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative  
**James Goodman**  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

10. The address of the office required to be maintained in the jurisdiction of its organization or, if not so required, the principal office of the limited liability company is:

3630 Peachtree Road NE Ste 1500 Atlanta GA 30326

(Street Address)

(City)

(State)

(ZIP Code)

11. a. The address of its registered office in Michigan is:

601 Abbot Road, East Lansing, MI

(Street Address)

(City)

, Michigan

48823

(ZIP Code)

- b. The mailing address of the registered office in Michigan if different than above:

(Street Address or PO Box)

(City)

, Michigan

(ZIP Code)

- c. The name of the resident agent at the registered office is:

CSC-Lawyers Incorporating Service (Company)

12. The Department is appointed the agent of the foreign limited liability company for service of process if no agent has been appointed, or if appointed, the agent's authority has been revoked, the agent has resigned, or the agent cannot be found or served through the exercise of reasonable diligence.

The name and address of a member or manager or other person to whom the administrator is to send copies of any process served on the administrator is: **(Must be different than agent shown in Item 11c)**

(Name)

(Street Address)

(City)

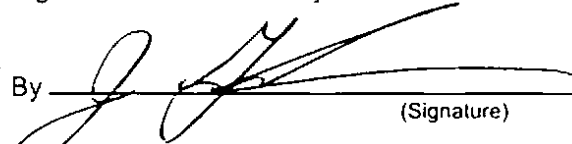
(State)

(ZIP Code)

13. If the business the foreign limited liability company proposes to do in this State is to be enlarged, limited, or otherwise changed, the **specific** business which the limited liability company is to transact in Michigan is as follows:

The limited liability company is authorized to transact such business or conduct such affairs in the jurisdiction of its organization.

Signed this 4 day of MARCH, 2020

X By  (Signature)

James Goodman

(Type or Print Name)

(Type or Print Title)

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

## CERTIFICATE OF AMENDMENT

### NAME CHANGE

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

**WRI PROPERTY MANAGEMENT, LLC**  
a Domestic Limited Liability Company

has filed articles/certificate of amendment in the Office of the Secretary of State on 03/06/2020 changing its name to

**ResiHome, Limited Liability Company**  
a Domestic Limited Liability Company

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta  
and the State of Georgia on 03/10/2020.



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF AMENDMENT NAME CHANGE

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

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a Domestic Limited Liability Company

has filed articles/certificate of amendment in the Office of the Secretary of State on 03/10/2020 changing its name to

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a Domestic Limited Liability Company

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta  
and the State of Georgia on 03/13/2020.



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State