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COVER LETTER

CR2E055 (12/13)

TO: Registration Section Division of Corporations
SUBJECT: BEST HOMES 4 U, 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:
JEANNETTE OLAGUE Name of Person
BEST HOMES 4 U, LLC Firm/Company
2250 NE 38E ST
Address
LIGHTHOUSE POINT, FL 33064 City/State and Zip Code
JEANNETTE. OLAGUE 1@ GMAIL. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: TEANNETTE OLAGUE at (909) 379-8090 Name of Person Area Code & Daytime Telephone Number
The eval a suprime respinsion rander
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 \$25 Status Certificate of Status Certified Copy \$60 Filing Fee, Certified Copy Certified Copy

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

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: BEST HOMES 4 U, LLC	
2. Jurisdiction of its organization: NEVADA	
3. Date authorized to do business in Florida: 06/03/20/4	
SECTION II (4-7 complete only the applicable changes)	
4. New name of the limited liability company: (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.") 5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	****
6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: <u>ADD AUTHORIZED PERSONS - TITLE MERS</u> OLAGUE, JEANNETTE OLAGUE, GINAGE 2250 NE 387H 57 LIGHT HOUSE POINT, FL 3304 LIGHTHOUSE POINT, FL	<u> </u>
7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in jurisdiction under the law of which this entity is organized.	
Signature of the authorized representative	
JEANNETTE OLAGUE	
Typed or printed name of signee	

Filing Fee: \$25.00