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(Re	equestor's Name)	-
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
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Office Use Only



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839

COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:_	08/28/2025	
Name:	Delijah Showers	
	nce #: 2873781	
Entity N	Name: AMERICAN HOME	S INVESTMENTS FL. LLC
	Articles of Incorporation/Authorization Amendment Change of Agent Reinstatement Conversion	n to Transact Business
	Merger Dissolution/Withdrawal	
	Fictitious Name Other	
Authori	ized Amount: \$25 ure: <i>Delijah Showers</i>	



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues please contact Cheyanne at 850-202-1882

Date:08/28/2025			
Name: Delijah Showers			
Reference #:			
Entity Name:AMERICAN HOMES INVESTMENTS FL. LLC			
Articles of Incorporation/Authorization to Transact Business			
Amendment			
Reinstatement			
Conversion			
☐ Merger			
☐ Dissolution/Withdrawal			
☐ Fictitious Name			
Other			
Authorized Amount: \$25			
Signature Delivah Showers			

F: +852.2682.9790

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. Na	ame of the limited liability company:A	AMERICAN HOMES INVESTMENTS FL. LLC		
	No Change		No Change	
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	8/17/2018		M18000007702	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)				
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		i. of State:	
1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<u></u>	
			0) 	
	PLANTATION, FL_	33324		
(b)	Cogency Global Inc.		ယ္ 	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office address:	:	
	115 North Calhoun St., Suite 4 NEW Registered Office Address:			
	Tallahassee . FL_			
the cha agent v was/we	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liabore.	he registered oility compa the limited	d office and the business office of the registered my, it is hereby contirmed that the change(s) Iiability company or as otherwise provided in	
	/s/ Helen Cho		Helen Cho	
I herei provisi the ohl to mere	ture of a member or authorized representative of a member by accept the appointment as registered agent and agre ins of all statutes relative to the proper and complete p igations of my position as registered agent as provided ity reflect a change in the registered office address. This if in writing of this change.	e to act in therformance for in Chap reby confir	Printed or typed name of signee his capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605. F.S. Or, if this document is being filed m that the limited liability company has been	
٠.	/s/ Tim Mayville			
Signatu	re of Registered Agent			