

Division of Corporations

MZ100005284

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407)841-1200
Fax Number : (407)423-1831

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: chris@armstronghomes.net

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2021 JUN 17 PM 4:24

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ARMSTRONG BROTHERS DEVELOPMENT GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

JUN 18 2021
S. PRATHER

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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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: Armstrong Brothers Development Group, LLC

Enter new principal office address, if applicable: 1415 SW 17th Street

(Principal office address MUST BE A STREET ADDRESS) Ocala, FL 34471

Enter new mailing address, if applicable: 1415 SW 17th Street

(Mailing address MAY BE A POST OFFICE BOX) Ocala, FL 34471

2. The Florida document number of this limited liability company is: M21000005284

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: May 3, 2021

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

5. 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.")

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: Fred C. Armstrong

New Registered Office Address: 1415 SW 17th Street

Enter Florida Street Address

Ocala Florida 34471 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.

x If Changing Registered Agent, Signature of New Registered Agent

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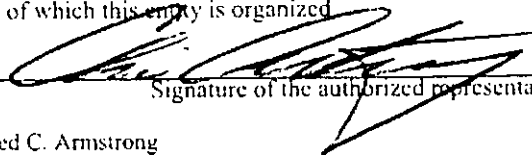
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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

Company is a member-managed limited liability company. The correct Members of the Company are:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Lennar LTL Member LLC	1415 SW 17th Street	<input checked="" type="checkbox"/> Add
		Ocala, FL 34471	<input type="checkbox"/> Remove
AMBR	Casa Holdings, LLC	1415 SW 17th Street	<input checked="" type="checkbox"/> Add
		Ocala, FL 34471	<input type="checkbox"/> Remove
MGR	Lennar LTL Member LLC	1415 SW 17th Street	<input type="checkbox"/> Add
		Ocala, FL 34471	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add

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

x 
Signature of the authorized representative

Fred C. Armstrong

Typed or printed name of signee

Filing Fee: \$25.00

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