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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J.N. Callahan FEB 17 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WISNESKI HOME SERVICES, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHERRIE L. WISNESKI

Name of Person

WISNESKI HOME SERVICES, LLC

Firm/Company

PO BOX 650519

Address

VERO BEACH, FL 32965-0519

City/State and Zip Code

SHERBERT26@COMCAST.NET

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

For further information concerning this matter, please call:

ROBERT WISNESKI

Name of Person

at (540)

798-7050

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
10 FEB 16 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WISNESKI HOME SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/09/2009 and assigned Florida document number L09000117287.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office 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:

SHERRIE L. WISNESKI

New Registered Office Address:

154 11TH AVE

Enter Florida street address

VERO BEACH

Florida

32962

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 608, 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.

Sherrie L. Wisneski

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ROBERT W. WISNESKI	154 11TH AVE VERO BEACH, FL 32962	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	SHERRIE L. WISNESKI	154 11TH AVE VERO BEACH, FL 32962	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED
 10 FEB 16 PM 12:07
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated 02/12, 2010

Robert W. Wisneski

Signature of a member or authorized representative of a member

ROBERT W. WISNESKI

Typed or printed name of signee