

L13000034655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

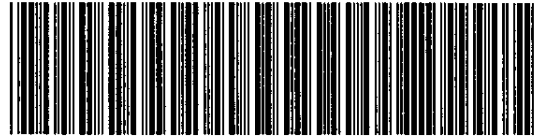
(Business Entity Name)

(Document Number)

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FILED  
13 DEC 27 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 31 2013  
T. BROWN

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Whole Home Solutions, 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:

**T. D. Gillis**

Name of Person

**Whole Home Solutions, LLC.**

Firm/Company

**6742 Forest Hill Blvd #128**

Address

**West Palm Beach, FL. 33413 P.O. Box 128**

City/State and Zip Code

**WHSLLC1@comcast.net**

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

For further information concerning this matter, please call:

**T. D. Gillis**

Name of Person

at ( **561** ) **722-8865**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 5, 2013

T.D. GILLIS  
WHOLE HOME SOLUTIONS, LLC  
PO BOX 128  
W PALM BEACH, FL 33413

SUBJECT: WHOLE HOME SOLUTIONS LLC  
Ref. Number: L13000034655

We have received your document for WHOLE HOME SOLUTIONS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown  
Regulatory Specialist II

Letter Number: 213A00027732

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

**FILED**  
13 DEC 27 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Whole Home Solutions 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 03/06/2013 and assigned Florida document number L13000034655.

This amendment is submitted to amend the following:

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

N/A

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)

6742 Forest Hill Blvd #128

West Palm Beach

Florida, 33413

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

Same as above

**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: N/A

New Registered Office Address: N/A

*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 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.*

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	T. D. Gillis	6742 Forest Hill Blvd. #128	<input checked="" type="checkbox"/> Add
		W. Palm Beach, FL 33413	<input type="checkbox"/> Remove
MGR	Glenn A Chaplin	5110 Heron Court	<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

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

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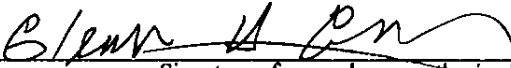
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Dated Tuesday December 10, 2013.



Signature of a member or authorized representative of a member

Glenn A Chaplin

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**