118000/67849

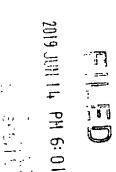
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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C. GOLDEN

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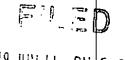
TO: Registration Section Division of Corporations	
SUBJECT: DRIGIN HOMESTAGING & DESIGNLUC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Megaa Gerkea Name of Person	
Firm-Company	
2203 N 44+h AVE	
Hullywood, FL 33021 City/State and Zip Code	
E-mail address: (to be used for future sentual report notification)	
For further information concerning this matter, please call:	
Megan Gerken at (954) 639 · 6000 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigsup \text{\$\$30.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \$\Bigsup \text{\$\$\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\Bigsup \text{\$\$\$\$\$Certified Copy (additional copy is enclosed)} \$\Bigsup \text{\$\$\$\$\$\$\$Certified Copy (additional copy is enclosed)} \$\Bigsup \text{\$\$\$\$\$\$\$\$\$}	

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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2019 JUH 14 PH 6: 01

ORIGIN HOME STACING and Design Luc (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 2001 AV, 2013 and assigned Florida document number L1800167849 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ORIGIN HOME SERVICES LLC

ew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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: ZZO3 N 44+h AVE
Enter Florido street address New Registered Office Address: 1-t-olly 10 od Florida 37021
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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:			
MGR = AMBR =	Manager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
			Change
			Remove
			□ Remove
			☐ Change
,			Add
			□ Remove
			□ Change
			Add
		-	□ Remove
			□ Change
·			
			Remove

	,
(If an e <u>Note</u>	effective date, if other than the date of filing: \(\subseteq \subseteq \subseteq \cdot\) \(\subseteq \subseteq \cdot\) (optional) effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) 1 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
(b) Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	Mya June 5th, 2019. Signature of a member or authorized representative of a member
	My Signature of a member or authorized representative of a member
	Megan Gerken Typed of printed name of signee

Page 3 of 3

Filing Fee: \$25.00