L190000 11325

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)
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COVER LETTER

TO:

	egistration Se ivision of Cor			
	Access Car			
SUBJECT	`:	Name of Lim	ited Liability Company	
The analog	ad Amiolog of	Amendment and fee(s) are sub	mittad for filips	
		ndence concerning this matter	_	
		Robert E Ritter		
			Name of Person	
		Access Home Services L.I	C"	
			Firm/Company	
		436 Grand Canal Drive		
			Address	
		Kissimmee, Florida 34759		
		rritter513@yahoo.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report no	otification)
For further	information c	oncerning this matter, please co	all:	
Robert E I	Ritter		863 438-5300 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is	s a check for th	ne 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)
	Lailing Addres		Street Address: Registration S	ection
	ivision of C		Division of Co	
	.O. Box 632		The Centre of	
T	allahassee, I	L 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Access Car L.L.C		
(Name of the Limited Liability Compa (A Florida Limited I	i ny as it now appears on our records Liability Company)	<u></u>)
The Articles of Organization for this Limited Liability Company Florida document number L19000011325	1/00/2010	and assigned
This amendment is submitted to amend the following:		
	lity company boros	
A. If amending name, enter the new name of the limited liab Access Home Services "LLC"	mity company nere.	
The new name must be distinguishable and contain the words "Limited Liabil	lity Commune " the decimation "LLC"	ar the abbreviation (**)
Enter new principal offices address, if applicable:	Access Home Services "LLC"	ZO H
(Principal office address MUST BE A STREET ADDRESS)	436 Grand Canal Drive	AR R
The state of the s	Kissimmee, Florida 34759	AS O
Enter new mailing address, if applicable:	Access Home Services "LLC"	SE A O
(Mailing address MAY BE A POST OFFICE BOX)	436 Grand Canal Drive	- 3 - 2
in the state of th	Kissimmee Florida 34759	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter t</u>	the name of the new registered
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	Fla	rida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, an provided for in Chapter 605, F	d I am familiar with and P.S. Or, if this document is

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
		/	□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
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			□Change
			□Add
			□Remove
			□Change

Page 2 of 3

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an effect <u>ote:</u> If	tive date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o Oth day after the record is filed.
ned _	MARICH 4, 2020
	Manch 4 2020 Cacul E College Signature of a member or authorized representative of a member

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Filing Fee: \$25.00