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SECRETARY OF STATE ANASSEE, FLORID

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EXAMINER

Gretchen M. Nine-Bunnell

HAHN 🕕 LOESER

Direct Phone: 216.274.2217 Direct Fax: 216.274.2417

E-mail: gmnine-bunnell@hahnlaw.com

July 26, 2010

VIA FEDERAL EXPRESS

Florida Secretary of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Re: LLC Name Change Filings

Dear Sir/Madam:

Enclosed for filing with your office, please find the following items in order to change the name of two (2) limited liability companies. Please note that due to the similarity of the names, please file the documents in the order as set forth below.

- 1. Cover Letter and Articles of Amendment for Empty Nest Home Services, LEC;
- Cover Letter and Articles of Amendment for ENHS, LLC; and
- 3. Two (2) checks, each in the amount of \$25.00, to cover the filing fee for each amendment.

Upon your review of the enclosed and if everything is satisfactory, please file the documents in the order indicated and return your confirmations of same to the undersigned.

Please call me with any questions (collect) at 216-274-2217.

Sincerely yours,

Gretcher M. Nine-Bunnell

Paralega)

Enclosures

cc: Robert A. Cooper, Esq. (w/encl.)

CLE - 2861540.1

COVER LETTER

SUBJECT:		Home Services, LLC			
The enclosed Articles of An Please return all corresponden		-			
	Gr	etchen M. Nine-Bunnell			
:		Name of Person			
•	Ha	ihn Loeser & Parks LLP			
*		Firm/Company			
•	200 (Public Square, Suite 2800		TALL SECTION	
		Address		全治 宣	3
	(Cleveland, OH 44114		27 TARY TARY	D Parties
		City/State and Zip Code			3
· .		gnb@hahnlaw.com			ž.,
•	E-mail address: (to be used for future annual report notific	ration)	: 20 PRIO	
For further information con-	cerning this matter, please	call:		À	
Gretchen I	И. Nine-Bunnell	_{at (} 216 ₎	274-2217		
Name of Po	erson	Area Code & Daytime	Telephone Number	r	
Enclosed is a check for the	following amount:				
\$25.00 Filing Fec	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	ľ

Registration Section Division of Corporations

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

Empty Nest Home	Services, LI	LC		
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appear bility Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company we Florida document number L05000021137	ere filed on	March 2, 2005	and assig	ned
Florida document numberL05000021137				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability	ty company here	<u>e</u> :		
M T NEST HOME SE	RVICES, LLC		AS 题	
The new name must be distinguishable and end with the words "Limited "L.L.C."	I Liability Compar	ny," the designation '	'LLC or the abl	oreviaţion
Enter new principal offices address, if applicable:			SSE -1	
(Principal office address MUST BE A STREET ADDRESS)		·	me a	. ۱ ا بنس تن
		· ·		
			20 E	
Enter new mailing address, if applicable:	- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
(Mailing address MAY BE A POST OFFICE BOX)				
•				
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on o	ur records, <u>enter</u>	the name of	the new
Name of New Registered Agent:				
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·		
,	Ent	er Florida street ad	dress ·	
·		, 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 = N MGRM =	i Annager - Managing Member		
Title	<u>Name</u>	Address	Type of Action
			Add
			— ,
			Add Remove
,			- Kernove
			Add
7			Remove
. ,			
			27 \SSE! \Add
			- Remove
		·	: 20 0RIO
D. If ame	nding any other information, en	er change(s) here: (Attach additional shee	ets, if necessary.)
-			**************************************
		,	
<u></u>			1 A TO
-	<u> </u>		
Dated	7-1	2010	
•	Davis	1 2 Mills	
	Signature of	a member of authorized representative of a me	mber
•	Davi	d L. M:115 Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00