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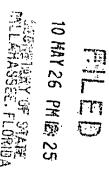
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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D. BRUCE

MAY 27 2010

EXAMINER

## **COVER LETTER**

Division of Co	rporations			
SUBJECT:	Argus Ho	me Services, LLC		
		ited Liability Company		· <b>-</b>
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please return all correspondent	ondence concerning this matte	er to the following:		
		Gary Hutchinson		
		Name of Person		<del></del>
	Argus and Atherton, LLC			
	Firm/Company			-
	27	28 Cape Coral Pkwy V	<b>~</b>	
		Address		
	Cape Coral, FL 33914			# 10 H
	A	City/State and Zip Code rgus_hs@comcast.net		7 2
	E-mail address:	to be used for future annual repo	ort notification)	PAR IN
For further information of	concerning this matter, please	call:		S D D
	y Hutchinson	at ( 239 )	887-7924	夏西 S
Name o	of Person	Area Code &	Daytime Telephone Num	ıber
Enclosed is a check for the	he following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Certif nclosed) Certif	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
MAIL	ING ADDRESS:	STREET/C	OURIER ADDRESS	:

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

TO:

**Registration Section** 

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Argus Ho	me Services, LLC	<u>.                                    </u>		
( <u>Name of the Limited Liability</u> (A Florida Li	Company as it now appea mited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Co	mpany were filed on	01/27/2008	and assigned	
Florida document numberL07000036785	<b>~</b> ·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company he	re:		
Argus ar	nd Atherton, LLC			
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Compa	any," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	(22)			
The state of the s	.553/	À.		
	<u> </u>	<u> </u>		
Enter new mailing address, if applicable:		<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)		121		
Maning Buntess MATIBLATOST OFFICE BOX				
B. If amending the registered agent and/or registeregistered agent and/or the new registered office addre		our records, enter th	CD O	
Name of New Registered Agent:				
New Registered Office Address:				
	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.

J. 📆 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 Title Name <u>Address</u> Type of Action ☐ Add Remove Remove ☐ Remove Remove Remove  $\prod$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **May 19** 2010 Dated

Gary Hutchinson

Typed or printed name of signee

Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00