L07000062453

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phone	e #)
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COVER LETTER

Registration Section

TO:

Division of Cor	porations			
Your Home	e Digital, LLC			
SUBJECT:	Name of Lim	ited Liability Company	 	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Sean D. Stockeil			
		Name of Person		
	Your Home Digital, LLC			
		Firm/Company		
	1283 W. Skyview Crossing	g Drive		
		Address		
	Hernando, FL 34442			
	-	City/State and Zip Code		
	Sean@YourHome Source.o	com to be used for future annual report notif	ication)	
For further information c	oncerning this matter, please c			
Sean D. Stockell		813 240-7881		
Name o	f Person	at () Area Code Daytime	Telephone Number	_
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60,00 Filing F Certificate of Certified Copy (additional copy?)	Status & T
Registr Divisio P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	i ations ater Circle	MARINED TO BED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Financial Fitness, LLC

(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L07000062453</u>	were filed on 06-13-2007 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
Your Home Digital, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1283 W. Skyview Crossing Drive	
(Principal office address MUST BE A STREET ADDRESS)	Hernando, FL 34442	
Enter new mailing address, if applicable:	P.O. Box 97	
(Mailing address MAY BE A POST OFFICE BOX)	Lecanto, FL 34460-0097	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:	ffice address on our records, enter the name of the new	
N	chi	
New Registered Office Address:	Enter Florida street address Florida City	
New Registered Agent's Signature, if changing Registered Agent:	·	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familtar with and provided for in Chapter 605, F.S. Or, if this document is	

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 Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			Change
			☐ Remove
			□ Change
			□ Add
	CHARLE?		□ Remove
			Change
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			☐ Change ☐ ☐ Add 33 ☐ Remove
			回 Add ら の Add ら
			□ Remove
			Change

		
		
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to there are the above	07-16-2017	
Note: If the date inserted in th	he date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	. to 605.0207 (3)(t be listed as the
If the record specifies a dela (b) The 90th day after the	ved effective date, but not an effective time, at 12:01 a.m. on the ecord is filed.	earlier of:
Dated	, 2017	
Des 1	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00