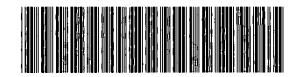
# L0800028822

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000119781450

03/31/08--01035--009 \*\*25.00

O8 MAR 31 AM 8: 19
SECRETARY OF STATE

BAR 4/1

#### **COVER LETTER**

TO: Registration S Division of Co		,			
, Away E	rom Home Broperty Se	nvices IIC			
SUBJECT: Away-From-Home Property Services, LLC (Name of Limited Liability Company)					
	(114410-01-241	·			
		•			
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	ondence concerning this matter	r to the following:			
	Kimbady Batan				
	Kimberly Peters	(Name of Person)	<del></del>		
		(			
		(Firm/Company)	<del></del>		
	3161 Archer Avenue				
		(Address)			
	Lady Lake, FL 3216	52			
		(City/State and Zip Code)			
For further information concerning this matter, please call:			SEGRE	08 MAR	
Kimberly Peters		at (352 ) 454-2623	ASS	ယ	-
(Name of Person)		(Area Code & Daytime	Telephone Number)	7	
			FLOF	8	
Enclosed is a check for	the following amount:		Ş	19	
\$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 Sta Certified Copy (additional copy	atus &	sed)

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

(Name of the Limited I	om-Home Property Servic Liability Company as it now app Florida Limited Liability Compan	ears on our recor	<u>ds.</u> )		
The Articles of Organization for this Limited Lia	bility Company were filed on N	March 19, 2008	3 and a	ssigned	
Florida document number <u>L08000028822</u>	<del></del>				
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liability company l	<u>here</u> :			
The new name must be distinguishable and end with 'L.L.C."	the words "Limited Liability Con	npany," the designa	ation "LLC" or th	e abbrevia	 ation
B. If amending the registered agent and/o	_	n our records, g	enter the name	of the	new
registered agent and/or the new registered off	<u>ice address here</u> :		08 SE		٠
			MAR CRET		· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:	Kimberly Peters		- <u>SSR</u> - <u>3</u>	(CATCODA)	—· <sup>-</sup>
New Registered Office Address:	3161 Archer Avenue			M	
		(Enter Florida sti	reet address) >		
	Lady Lake	, Flor	ida <b>3</b> 2162		:
	(City)		(Zip C	ode)	

#### 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 = Manager MGRM = Managing Member Title Name Address Type of Action MGRM Charles R. Peters, Jr. 3161 Archer Avenue Lady Lake, FL 32162 Remove MGR Deborah Balogh Add 811 E. Live Oak Street Wildwood, FL 34785 **√** Remove MGRM Philip Sumey 811 E. Live Oak Street Add Wildwood, FL 34785 Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Mailing Address: 3161 Archer Avenue, Lady Lake, FL 32162 Dated March 17 2008 gnature of a member or authorized representative of a member

Page 2 of 2

Kimberly Peters, Manager

Filing Fee: \$25.00

Typed or printed name of signee