L08000058200

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T. HAMPTON

JUL 1 8 2008

EXAMINER



COVER LETTER

TO: Registration Section of Corp.				
suвject: <u>Home Te</u>	echnologies Interna			
	(Name of Limi	ted Liability Company)		
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Adrian Sarkis			
		(Name of Person)		
Home Technologies International LLC				
(Firm/Company)				
1701 E. Orangeside Road				
(Address)				
	Palm Harbor, FL 34683			
		(City/State and Zip Code)		
For further information co	ncerning this matter, please ca	ali:		
Christopher Killmeyer		at (954) 567-0013		
(Name of	Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for the	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)	

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

Home Technologies International LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our reco Liability Company)	<u>rdş.</u>)
The Articles of Organization for this Limited Liability Company	were filed on 6/12/2008	and assigned
Florida document number L08000058200		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		SEG SEG
(Principal office address MUST BE A STREET ADDRESS)	<u></u>	
Enter new mailing address, if applicable:		SEE PLON
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address he		enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida :	street address)
	, Flo	orida
	(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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Dawn Sarkis	1701 E. Orangeside Road Palm Harbor, Fl. 34683	Add Remove
			Add
			Add Remove
·			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if neces.	
			FILE 08 JUL 17 SECKETAGO OF TALLANIAS SEE
Dated	June 23 , 2008		PH 1: 57
	Adrian Sarkis - Manag	er or authorized representative of a member ling Member d or printed name of signee	

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Filing Fee: \$25.00