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S. HAWKES

APR - 2 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RER Home Pro Services, LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Roald W. Howard (Name of Person)
RER. Home Pro. Services, LLC (Firm/Company)
7804 Colley Rocol (Address)
Odes60 Florida 33556 (City/State and Zip Code)
For further information concerning this matter, please call:
Robin Houard at (813), 333-4846 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\sigma \frac{1}{2} \\$25.00 \text{ Filing Fee & Certificate of Status} \square \frac{1}{2} \\$55.00 \text{ Filing Fee & Certificate of Status} \square \frac{1}{2} \\$55.00 \text{ Filing Fee & Certificate of Status & 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

RER Home Pro Services, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	y Company were filed on 10/a-	1/2008 and assigned	
Florida document number LOSOO 1000	787		
		S T	
This amendment is submitted to amend the following			
A. If amending name, enter the new name of the l	imited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the	e designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office a		cords, <u>enter the name of the new</u>	
Name of New Registered Agent:			
New Registered Office Address:	(Futon Fl.	orida street address)	
	(Enter Fic	માં વિવ કામ છેલે વિવાસ હકક <i>)</i>	
		, 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 = Manager

MGRM = Managing Member Type of Action Title **Address** <u>Name</u> Robin L. Howard _ Add Remove Add Remove 🗖 Aďd 🗖 Remove ſ**™** Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 3/27/20 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00