

L08000106001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

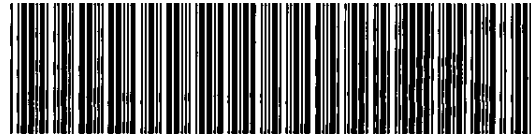
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MAY 24 2011

EXAMINER



100207931611

05/23/11--01026--007 **25.00

FILED
11 MAY 23 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Home Retention Solutions and Management, 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:

David McGinnis

Name of Person

Home Retention Solutions and Management, LLC

Firm/Company

1120 E. Kennedy Blvd, Suite 231

Address

Tampa, Florida 33602

City/State and Zip Code

david@homersm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David McGinnis

Name of Person

at (888)

971-6637

Area Code & Daytime Telephone 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 Retention Solutions and Management, 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 Company were filed on 11/14/2008 and assigned
Florida document number L08000106001.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1120 E. Kennedy Blvd

Suite 231

Tampa, Florida 33602

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1120 E. Kennedy Blvd

Suite 231

Tampa, Florida 33602

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TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

David McGinnis

New Registered Office Address:

1120 E. Kennedy Blvd, Suite 231

Enter Florida street address

Tampa

Florida

33602

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Jeffrey Shurtleff	275 Bayshore Blvd. Unit 1405 Tampa, Florida 33606	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Kortney Taylor	1501 W. Horatio Tampa, Florida 33606	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	David McGinnis	1120 E. Kennedy Blvd. Suite 231 Tampa, Florida 33602	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated January 30, 2011.


Signature of a member or authorized representative of a member

David McGinnis

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00