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FILED
10 MAY 28 PM 2: 20
SECRETARY OF STATE

J. BRYAN
JUN -1 2010
EXAMINER

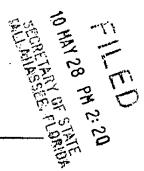
COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	LITTLEGUY E	ENTERPRISES, LLC	
		ted Liability Company	
		•	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		BRAD A TINGLEY	10 HAY 28 PH 2: 20
		Name of Person	128 F
			P. C.
		Firm/Company	F 2:
	792	28 LEIGHTON CIRCLE	20 BE 20
		Address	****
	NEW	PORT RICHEY, FL 34654	
		City/State and Zip Code	
	HUMEBAS	EALPHA OVER 12 to be used for future annual report notification	LON, NET
	`	•	ron)
For further information c	oncerning this matter, please o		
BRAD 1	9. TINGLEY	at (727) 543-7 Area Code & Daytime T	7594
Name o	f Person	Area Code & Daytime T	elephone Number
Enclosed is a check for the	e following amount:		!
\$25.00 Filing Foo	\$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)
:		:	
	ING ADDRESS: ation Section	STREET/COURIER Registration Section	R ADDRESS:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LITTLEGUY ENTERPRISES. LLC



(Name of the L	Imited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Lim	nited Liability Company were filed on	04/24/2009	and assigned
Florida document numberL090	00039595		
This amendment is submitted to amend t	he following:		
A. If amending name, enter the new n	ame of the limited liability company h	e <u>re</u> :	
	HOMEBASEALPHA, LLC		
The new name must be distinguishable and "L.L.C."	end with the words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if	applicable:		
(Principal office address MUST BE A S	TREET ADDRESS)		
Enter new mailing address, if applicab			
(Mailing address MAY BE A POST OF			
B. If amending the registered agent registered agent and/or the new registered.		our records, enter ti	ne name of the new
Name of New Registered Agen	d:		
New Registered Office Address		inter Florida street addi	ess
, ,			
•	Cto	, Florida	7in 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

	Name	Address	Type of Action
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men	ling any other information, enter cha	ange(s) here: (Attach additional sheets,	if necessary.)
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Page 2 of 2

Filing Fee: \$25.00