## #L09000040798

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(Address)				
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(City/State/Zip/Phone #)				
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K. SALY EXAMINER FEB 28 2012

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: DESIGNER'S HAVEN LC	
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:	
JAME TOUNCAN  Name of Person  TOESIGNER'S HAVEN UC  Firm/Company	
tweeter land the same of reson	
Firm/Company	
P.O. BOX 490792  Address	
Address	
LEESBVRG FL 34-149	
City/State and Zip Code  STEVES ON SITE SERVICES @ LIVE. COM  F-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
JAMIE DUNCAN at (813), 84392166	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	ed)

MAILING ADDRESS:

TO:

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

	FILED
12	FEB 27 PM 3: 47
TAIT	ALASSIE, FLORIDA
<u>ds.</u> )	THOUSE, FLORIDA

Name of the Limited Liability Company as it now appears on our recor (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ONSITE SERVICES 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add		
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D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)			
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			No.		
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			_		
Dated					
	Signature of a member	or authorized representative of a member			
	C JA	IMIE MAIRIE DUNCAN			
	Typed (	or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00