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FILED
2011 DEC -7 AM II: 0
SECRETARY OF STATE

J. BRYAN

DEC -8 2011

EXAMINER

COVER LETTER

Division of Corporations				
SUBJECT: S & S Home Improvements, 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:				
Name of Person Firm/Company				
Firm/Company				
3128 Ashford Sq.				
Vero Boach FL 32966 City/State and Zip Code				
arce Lamily Dlive.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Person at (TL) S34 -4608 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee & Status Sta				
MAILING ADDRESS: Registration Section Registration Section Registration Section				

Registration Section

TO:

Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SES Home I	morovement.	2. LLC	
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appear Limited Liability Company)	rs oh our records.)	
The Articles of Organization for this Limited Liability of Florida document number <u>L 100000223</u>	Company were filed on <u>C</u>	>3/01/2010 and assigned	
This amendment is submitted to amend the following:		A CONTRACT OF THE PROPERTY OF	
A. If amending name, enter the new name of the lin	nited liability company her	e:	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Compa	ny," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
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 add		our records, enter the name of the new	
Name of New Registered Agent:		The state of the s	
New Registered Office Address:			
	Enter Florida street address		
	Cir.	, 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 <u>Title</u> Name **Address Type of Action** MGRM Arce, Lianne J □ Add Remove ☐ Add Remove ☐ Add Remove Remove ∏Add ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

Page 2 of 2

Dated 17/4/2011

Filing Fee: \$25.00

Signature of a member or authorized representative of a member