L10000026164

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	→ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

JAN 2 3 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

₋₋ C & B Home 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:

Brittany Orlando

Name of Person

C & B Home Services, LLC

Firm/Company

787 Commerce Dr. #5

Address

Venice, FL 34292

City/State and Zip Code

brittany@candbhomeservices.com

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

For further information concerning this matter, please call:

Brittany Orlando

941 485-1234

Name of Person

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)

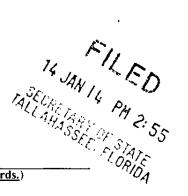
□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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



C & B Home 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 Company	y were filed on 03/08/2010	and assigned
Florida document number L10000026164		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
C & B Field Services, LLC		
The new name must be distinguishable and end with the words "Lir"L.L.C."	mited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	787 Commerce Drive	
(Principal office address MUST BE A STREET ADDRESS)	Suite #5	
	Venice, FL 34292	
Enter new mailing address, if applicable:	787 Commerce Drive	
(Mailing address MAY BE A POST OFFICE BOX)	Suite #5	
	Venice, FL 34292	
B. If amending the registered agent and/or registered oregistered agent and/or the new registered office address he		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	eet address
	, Flori	
	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 605, 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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action	
			Add	
			Remove	
			Add	
			Remove	
			Remove	
			Add	
			Remove	
			·····	
			Add	
			Remove	
			Add	
			Remove	

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
E. Effe (If an e	ective date, if other than the date of filing:
Dated _	·
	Brittany Orlando Typed or printed name of signee
	Signature of a member or authorized representative of a member
	Brittany Orlando
	1 yped or printed name of signee

Page 3 of 3

Filing Fee: \$25.00