

L16000048792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

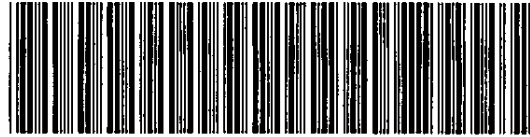
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
15 FEB 23 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. G. HARRIS MAR 04 2015

**LAW OFFICES OF  
STEPHEN P. SAPIENZA**

P.O. Box 635  
Bunnell, FL 32110  
Telephone: (386) 437-1814  
Fax: (386) 437-1815

February 20, 2015

Registration Services  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Articles of Amendment to Articles of Organization of HORIZON LIVING HOME  
CARE, LLC (Document No: L10000048792)  
(Change of Name to Clean Pro Home & Office Services, LLC)

Dear Sirs:

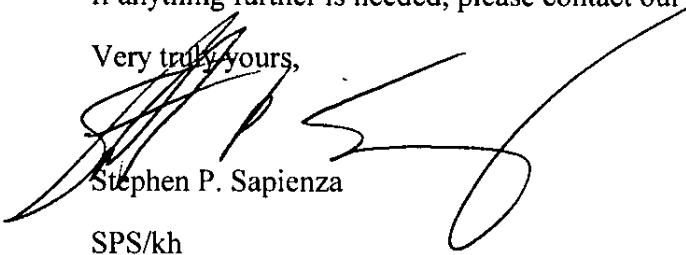
Enclosed please find my client's application of Articles of Amendment to Articles of  
Organization for HORIZON LIVING HOME CARE, LLC .

My client is only changing the name of his LLC to Clean Pro Home & Office Services, LLC, all  
other information remains the same.

Enclosed is our check in the sum of \$25.00 for the filing fee.

If anything further is needed, please contact our office.

Very truly yours,



Stephen P. Sapienza

SPS/kh

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Horizon Living Home Care, 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:

Lawrence R. Valenta

\_\_\_\_\_  
Name of Person

Horizon Living Home Care, LLC

\_\_\_\_\_  
Firm/Company

23 Clydesdale Drive

\_\_\_\_\_  
Address

Ormond Beach, FL 32174

\_\_\_\_\_  
City/State and Zip Code

worldhiker1@yahoo.com

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

For further information concerning this matter, please call:

Lawrence Valenta

386 673-0358

\_\_\_\_\_  
Name of Person

at ( )  
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**

Horizon Living Home Care, 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 05/05/2010 and assigned Florida document number L10000048792.

This amendment is submitted to amend the following:

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

Clean Pro Home & Office Services, LLC

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*

*City*

*Florida*

*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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<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.)*

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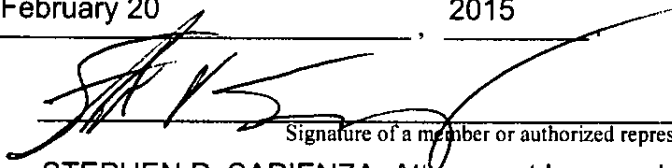
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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated February 20, 2015



Signature of a member or authorized representative of a member

STEPHEN P. SAPIENZA, Attorney at Law, on behalf of LAWRENCE R. VALENTA, MGRM

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 FEB 23 AM 9:00

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