410000109668

(Requestor's Name)
(Address)
(Address)
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A. LUNT
AUG 19 2011
EXAMINER

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08/18/11--01007--005 **25.00

COVER LETTER

رTO	Registration S Division of Co	ection rporations				
SUBJE	CT:	Bulldog Pro	perty Preservation			
		Name of Limit	ted Liability Company			
		Amendment and fee(s) are sub	_			
	. •••••	enacine concerning and master	ac and to the many.			
		+	C Richard Swenson			
			Name of Person			
		Bullde	og Property Preservation			
•			Firm/Company			
415 46th St NW				<u> </u>		
			Address			
		i i	Bradenton Fl. 34209		ZOII AUG 18	_
			City/State and Zip Code		SEE I	_
rswen779491@verizor		en779491@verizon.net			וורבו	
For fur	ther information	e-mail address: (to concerning this matter, please concerning this matter)	o be used for future annual report notifica all:	uion)	PH 4: 11	les,
	C Rie	chard Swenson	at (941)7	48 2624		
	Name	of Person	Area Code & Daytime	l'elephone Number		
Enclose	ed is a check for t	he following amount:				
₹ 25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
		ING ADDRESS:	STREET/COURIE Registration Section	R ADDRESS:		

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

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bulldog Prope	rty Preservati	on	
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appead Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Compa	ny were filed on	Oct. 20 2010	and assigned
Florida document numberL10000109668			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company he	<u>ere</u> :	
Genesis H	ome Repair		
The new name must be distinguishable and end with the words "Li" "L.L.C."	mited Liability Comp	pany," the designation "LI	C" or the abbreviation
Enter new principal offices address, if applicable:	Same		
(Principal office address MUST BE A STREET ADDRESS)			
		C	
Enter new mailing address, if applicable:	Same	ŗ	
(Mailing address MAY BE A POST OFFICE BOX)			
		3	The same
			•
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		our records, enter th	e name of the new
Name of New Registered Agent: NA			
New Registered Office Address:			
	E	nter Florida street addre	ess
		, 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

IGR = M IGRM =	lanager Managing Member		
itle	Name	<u>Address</u>	Type of Action
	Same		Add
			Remove
			Remove
			_ ×
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			Damosia
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If ame	nding any other information	enter change(s) here: (Attach additional shee	ts, if necessary.)
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		Ridard Sevenia	
	Signatur	re of a member or authorized representative of a member of a wenson	mber

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Filing Fee: \$25.00