

## 111000009985

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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations			
SUBJECT:	LOYAL RO	SE HOLDINGS LL	С	
		nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	•	
Please return all correspo	ondence concerning this matte	er to the following:		
		JAMIE MROZOWSKI		
		Name of Person		
	LOYA	AL ROSE HOLDINGS	LLC	
		Firm/Company		
	3069 ANDERSON SNOW RD STE 205			
		Address		
	S	PRING HILL FL 3460	9	
		City/State and Zip Code		
	MROZO	OWSKI.JAMIE@GMAI (to be used for future annual rep	L.COM	
For further information c	oncerning this matter, please		·	
JAMIE	MROZOWSKI	at ( <u>813</u> )	918-2545	
Name o	f Person	Area Code &	Daytime Telephone Number	
Enclosed is a check for the	ne following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e		of Status &
Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327	Registration Division of Clifton Bui	Corporations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Name of the Limited Liability Company as it now appears on our records.)	
(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 and assi Florida document number L11000009985	gned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
HOME SOLUTIONS NOW LLC	
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the at "L.L.C."	obreviation
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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  City  City  Discreption of New Registered Agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address on our records, enter the name of registered agent and/or the new registered office address here:	
New Registered Agent's Signature, if changing Registered Agent:	. <u>;</u>

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

<u> </u>	<u>Name</u>	<u>Address</u>	Type of Actio
<del></del>			Pamova
<u></u>			Add Remove
			Add Remove
	<del></del>		AddRemove
			Add Remove
. If amend	ling any other information, e	nter change(s) here: (Attach additional shee	ets, if necessary.)
			·····
ated <u>Feb</u>	orwany 27	_, 2012	
	Signature	of a member or authorized representative of a me	mber

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Filing Fee: \$25.00