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SECRETARY OF STATE AND A HASSEE, FLORIDA

N. Culligan JUL 10 2011;

COVER LETTER

TO:	Registration Sectorial Division of Corp.	ion orations	.* ***********************************			
SUBJE	·CT·	RST Hom	e Services, LLC			
50001			ed Liability Company			
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please	return all correspon	dence concerning this matter	to the following:			
			Rhonda S Muncy			
Name of Person						
	RST Home Services, LLC					
Firm/Company						
905 Palm Forest Lane Suite 100						
Address						
Minneola, FL 34715						
City/State and Zip Code						
		RhondaMuncy@SqueegeeSquad.com E-mail address: (to be used for future annual report notification)				
For fur	ther information cor	ncerning this matter, please ca	all:			
		nda Muncy	411 J	132-3656		
	Name of I	Person	Area Code & Daytime	Telephone Number		
Enclose	ed 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:

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SECRETARY OF

		SECRETAR	Y OF STATE EE, FLORIDA		
RST Home So	ervices, LLC	IALLAHASS	EE FLODINA		
(Name of the Limited Liability Compa (A Florida Limited L	<u>ny as it now appears</u> Liability Company)	on our records.)	-, CORIDA		
			,		
The Articles of Organization for this Limited Liability Company	were filed on	May 19,2011	and assigned		
Florida document numberL11000059067					
This amendment is submitted to amend the following:					
A TC	:11:4 L	_			
A. If amending name, enter the new name of the limited liab	inty company nere				
775	4.11:1.11:4.6		I C" and a abhumistic		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Compan	y," the designation "L	LC or the appreviation		
The form and the state of the s					
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)			· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:	614 E HWY 50	#345			
(Mailing address MAY BE A POST OFFICE BOX)	Clermont, FL 3	34711			
B. If amending the registered agent and/or registered of		r records, <u>enter t</u>	he name of the new		
registered agent and/or the new registered office address here	<u>e</u> :				
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
	, 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 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 **Title** Type of Action Address Name **MGRM** Terry A Muncy Jr. 614 E HWY 50 #345 **✓** Add Remove Clermont, FL 34711 ☐ Add Remove _ Add Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 11 2011 Signature of a member or authorized representative of a member Rhonda S Muncy

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee