

L11000114997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

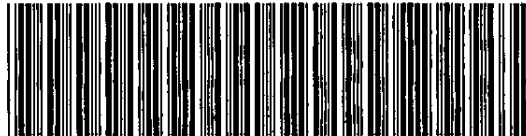
(Business Entity Name)

(Document Number)

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2016 MAR 14 PM 1:56

CLERK OF COURT
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAR 16

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SOUTH FLORIDA 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:

Courtney Tate

Name of Person

Rowe Law Corporation

Firm/Company

113 Oil Center Drive

Address

Lafayette, Louisiana 70503

City/State and Zip Code

ctate3@gmail.com

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

For further information concerning this matter, please call:

Courtney Tate

337 658-6336
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

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**

SOUTH FLORIDA HOME CARE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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PALM BEACH, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on October 6, 2011 and assigned
Florida document number L11000114997.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

721 US-1 #207

North Palm Beach, Florida 33408

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Post Office Box 53425

Lafayette, Louisiana 70505

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:

ANDREW BELLARD

New Registered Office Address:

721 US-1 #207

Enter Florida street address

North Palm Beach

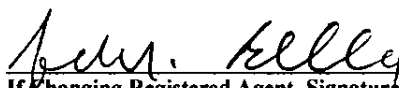
City

, Florida 33408

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
MGR	ANDREW BELLARD	721 US-1 #207	<input checked="" type="checkbox"/> Add
		North Palm Beach, Florida 33408	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	AMERICAN HOME CARE ASSO	100 Copper Ridge Drive	<input checked="" type="checkbox"/> Add
		Youngsville, Louisiana 70592	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FLEUR DE LIS CAPITAL LLC	14263 US Hwy 1	<input type="checkbox"/> Add
		Juno Beach, Florida 33408	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DAVID W. PAUL	14263 US Hwy 1	<input type="checkbox"/> Add
		Juno Beach, Florida 33408	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2016 APR 14 11:11 AM
 CLERK OF COURT
 2016 APR 14 11:11 AM
 CLERK OF COURT

2016 MAR 14
DEPT. OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

March 8

3016

Signature of a member or authorized representative of a member

DAVID W. PAUL, MANAGER OF FLEUR DE LIS CAPITAL LLC

Typed or printed name of signee