112000034437

(Requestor's Name)
(Requestors Name)
(Address)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/2/p/Pfloffe #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000296685710

03/20/17--01037--022 **55.00

MAR 22 2017 S. YOUNG TALLAHASSEE FLOCIDA

Dupla Home Services, LLC 4521 Golden Gate Cove Bradenton, FL 34211 (941) 527-6120 (941) 822-4714 duplahomeservices@yahoo.com

Florida Department of State Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

March 14, 2017

To Whom It May Concern:

Re: Amendment of Organization of a Florida Limited Liability Company

Please find a check (#1001) payable to the Florida Department of State for the total amount of the filing fee and a certified copy to change the business name, Dupla Cleaning Services, LLC, to Dupla Home Services, LLC. Also, Jessica Dellarossa is changing her title from manager to authorizing member; Kathleen Vacca is a new authorizing member. All business correspondence may be directed to either coowner.

Thank you for your attention on this matter.

Sincerely Yours,

Jessica Dellarossa

Kathleen Vacca

COVER LETTER

	legistration Se Division of Cor						
SURIFCI		ne Services, LLC					
SOBJECT	Name of Limited Liability Company						
The enclos	sed Articles of	Amendment and fee(s) are sub-	mitted for filing				
		ondence concerning this matter					
		Jessica Dellarossa and Katl	nleen Vacca				
			Name of Person				
		Dupla Home Services, LLC					
			Firm/Company				
		4521 Golden Gate Cove			يرتر اسب		
			Address		1 73		
		Bradenton, FL 34211			T MAR 20 PM 1: 14		
		10 PM					
		duplahomeservices@yahoo.	com o be used for future annual report notif	ication)	3 2		
For further	information c	oncerning this matter, please ca					
Kathleen	√acca		941 822-4714 at ()		•		
·	Name o	f Person	Area Code Daytime	: Telephone Number	_		
Enclosed is	s a check for th	he 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 F Certificate of Certified Copy (additional copy i	Status & V		
	Registr	ING ADDRESS: ration Section on of Corporations	STREET/COURI Registration Section Division of Corpor	n	•		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dupla Cleaning Services, LLC			
(<u>Name of the Lim</u>	ited Liability Company (A Florida Limited Liab	as it now appears on our records.) oility Company)	
The Articles of Organization for this Limited 1	= :	ere filed on 03/12/2012	and assigned
Florida document number L12000034437	·**		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liabil <u>it</u>	y company here:	
Dupla Home Services, LLC			
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)		一 写像
			T SR
			10 10 10 10 10 10 10 10 10 10 10 10 10 10
Enter new mailing address, if applicable:			20 58
Mailing address MAY BE A POST OFFICE	- E ROX)		
			- 503
	-		F
B. If amending the registered agent and registered agent and/or the new registered of	d/or registered offic office address here:	e address on our records,	enter the name of the nev
Name of New Registered Agent:	Kathleen Vacca		
New Registered Office Address:			
-		Enter Florida street address	
		, Flori	
		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 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>	Address	Type of Action
AMBR	Kathleen Vacca	4521 Golden Gate Cove, Bradenton	∃ Add
			☐ Remove
AMBR	Jessica Dellarossa		Add
			☐ Remove
			☐ Change
			TOMAN PROPERTY
			CRemove
			Change Co
			三 □ Add
			Remove
			Change
			Add
	•		☐ Remove
			☐ Change
			Remove
			Change

									
						•			

		<u> </u>							
			<u>.</u>						
								•	
				.			· · · · · ·	· ——	
						-			,
								=	-
								HR 20	H
								22	
								암	
							<u></u>	خ <u>تہ</u> بب	
							-		
								سلد	
	· · · · · · · · · · · · · · · · · · ·								
					, <u>, , , , , , , , , , , , , , , , , , ,</u>				
fective da an effective o	i te, if other tha date is listed, the da	n the date of fi	iling: c and cannot be	prior to date of f	iling or more than	(option 90 days after fi	tal) ling.) Pursuar	ıt to 605.0	207
ote: If the	date inserted in	his block does r	not meet the a	pplicable statut	ory filing requi	ements, this	late will not	be listed	as
ocument s	effective date on	the Department	of State's rec	ords.					
rocord	nacifias a da	laved offertio	ra data bu	t not an affi	ativo timo .	+ 12.01 5	m on tho	ممطامه	
	specifies a de i day after thi			t not an ene	cuve ume, a	11, 12,01 a.	in, on the	earner	Ų
ated	h 14		2017	·					
	1 01								
	1 10 44 110	. 1/1	4 1 1						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00