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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: Citrus Home Maintenance 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:							
Mary L. Benfer Name of Person Citrus Home Maintenance LLC Firm/Company 540 E. Epsom Court Address Hernando FL 34442 City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call: May Benfer							
Enclosed is a check for the following amount:							
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ 55.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ Certified Copy \\ \text{(additional copy is enclosed)}\$\$ Certified Copy \\ \text{(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

Citrus Ho	OME Main + willity Company as it now appeal ida Limited Liability Company)	enance L	LC
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appear ida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Florida document number <u>L /200059</u>	ty Company were filed on <u>1</u>	pril 21,2012	and assigned
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :	
The new name must be distinguishable and end with the L.L.C."	words "Limited Liability Compa	ny," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applicable:	<u></u>		
Principal office address MUST BE A STREET AL	ODRESS)		
•			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	<u> </u>	 	
	-		
3. If amending the registered agent and/or re registered agent and/or the new registered office a	_	our records, enterthe i	name of the new
		AR	5 1
Name of New Registered Agent:		- SAR	<u> </u>
New Registered Office Address:	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	R M
	En	ter Florida street dīdrkss ≅≧	بو چې
	City	, Florida 💆 📆	ip Code
	City	Z	ip coue

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	MGRM = Managing Member						
<u>Title</u>	Name	Address	Type of Action				
MGH	Robert M. Rumphsch	540 E. EDSOM Court Hernands, FL 34442	Add _ X Remove				
<u>ng Rn</u>	A Robert M. Rumplasch	540 E. E. Bom Court Hernande, Fr 3444Z	Add Remove				
MGR	Wagne R. Scheidt	13319 Susan Drive Hudson, FL 134667	Add Remove				
			Add Remove				
			Add _ Remove				
			Add Remove				
D. If an	nending any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)					
			-				
Dated _	July 30 , 201	12					
	May Benje	or authorized representative of a member					
	Mary L. Benfe	or printed name of signee					

Page 2 of 2

Filing Fee: \$25.00