

L12000K38337

(Requestor's Name)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

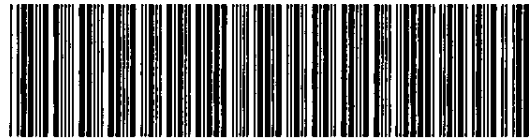
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 FEB -8 PM 4:02

FILED

Onesource Home Solutions, Inc.  
1500 Sunset Village Blvd  
Clermont, Florida 34711  
352-636-5502

February 6, 2013

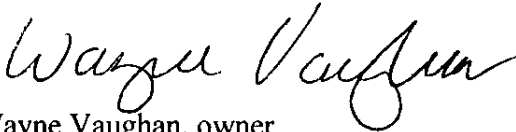
RE: Complete Foundation Systems LLC  
Name change

To Whom It May Concern:

I am the owner of both companies and authorize the name "Onesource Home Solutions LLC" to be used to change the name of Complete Foundation Systems LLC. We intend to close down Onesource Home Solutions, Inc. later in the year and combine our efforts into Onesource Home Solutions LLC.

Should you have any questions or need additional information please contact me at 352-636-5502. Thank you.

Sincerely,

A handwritten signature in black ink that reads "Wayne Vaughan". The signature is fluid and cursive, with the first name "Wayne" and last name "Vaughan" clearly distinguishable.

Wayne Vaughan, owner  
Email – [work1988@aol.com](mailto:work1988@aol.com)  
Fax – 877-556-0753

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: COMPLETE FOUNDATION SYSTEMS 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:

WAYNE VAUGHAN  
Name of Person

COMPLETE FOUNDATION SYSTEMS, LLC  
Firm/Company

1500 SUNSET VILLAGE BLVD  
Address

CLERMONT FL 34711  
City/State and Zip Code

WORK1988@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WAYNE VAUGHAN at 352 636-5502  
Name of Person Area Code & Daytime Telephone Number

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**

COMPLETE FOUNDATION SYSTEMS, LLC  
(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 10/30/2012 and assigned  
Florida document number L12000138337

This amendment is submitted to amend the following:

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

ONESOURCE HOME SOLUTIONS, LLC

The new name must be distinguishable and end with 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)

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 the new registered agent and/or the new registered office address here:**

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 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

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
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FEB - 8 PM 4:02  
FALL RIVER, MA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated 2/1, 2013.

Wayne Vaughan

Signature of a member or authorized representative of a member

WAYNE VAUGHAN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00