L12000157376

(Red	questor's Name)	_
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COYER LETTER

TO:	Registration Sec Division of Corp		·	
CUDE		ne Solutions,llc		
SUBJ	ECT:		ited Liability Company	
The er	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Rodney Hunter		
			Name of Person	
		Rodney Home Solutions, Il	с	
			Firm/Company	
		i 504 broken oak dr.		
			Address	
		winter garden,fl , 34787		
			City/State and Zip Code	
		lydell1980@yahoo.com		
For fu	rther information co	h:-mail address: (i oncerning this matter, please ca	to be used for future annual report notificall:	cation)
Rodne	ey Hunter		407 325-8970 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
\$2	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

Rodney Home Solutions, llc		
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited I	iability Company were filed on _	12/18/2012 and assigned
Florida document number L12000157376	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	<u>here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	75 8
		SE
		F1 03
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE	<u></u>	<u> </u>
B. If amending the registered agent and registered agent and/or the new registered of		on our records, enter the name of the new
Name of New Registered Agent:	Rodney Hunter	
New Registered Office Address:	1504 broken oak dr	
	Enter F	lorida street address
	winter garden	, Florida 34787
	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>	<u>Address</u>	Type of Action
MGR	Tearesa Hunter	1504 broken oak dr	☐ Add
		winter garden fl 34787	■ Remove
			Change
MGR	Rodney Hunter	1504 broken oak dr	Add
		winter garden fl 34787	Remove
			Change Add T Add T Remove
			Change
			□ Remove
			Change
		 	
			□ Remove
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			Add
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			Change

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cument's effective date on the	Department of	State's record	ls.				
record specifies a delaye	ed effective	date, but r	ot an effec	tive time, a	t 12:01 a.m	n. on the ea	arlier
The 90th day after the re							
July 21		2018					
ted		-,					

Page 3 of 3

Filing Fee: \$25.00