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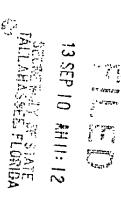
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COVER LETTER

	tion Section of Corporations		
SUBJECT: V	Name of Limited Liability Company		
The enclosed Artic	cles of Amendment and fee(s) are submitted for filing.		
Please return all co	orrespondence concerning this matter to the following:		
	Vittoria Whiteley Name of Person		
	VER ODD'S AND ENDS LLC Firm/Company		
	SSUY SE 177 Bartram Loop Address		
	The Villages, Florida 32162 City/State and Zip Code	ı	
	E-mail address: (dobe used for future annual report notification)	13 SEI	Section with a
For further informa	nation concerning this matter, please call:		entrante es un est de es
Vittoria	Name of Person at (3SZ) 3SO-1515 Area Code & Daytime Telephone Number C	AH III: 12	
Enclosed is a check	ck for the following amount:		
\$25.00 Filing F	Fee U\$30.00 Filing Fee & Certificate of Status Certified Copy Certificate Certified Copy (additional copy is enclosed) Certified Copy Certified Copy (additional copy is enclosed)	of Status & Copy	

MAILING ADDRESS:

4 to 2.00

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

VER ODD'S AND E	NDS LLC			
(Name of the Limited L (A F	iability Company Iorida Limited Lia	y <mark>as it now appears on ou</mark> ability Company)	r records.)	
		vere filed on 4/2	9/13	and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabil	ity company here:		
VER Home Service	es LLC	•		
The new name must be distinguishable and end with the 'L.L.C."	the words "Limite	d Liability Company," the	designation "L	LC" or the abbreviation
Enter new principal offices address, if applicab	ole:	8544 SE 177	Bartr	am loop
Principal office address MUST BE A STREET	ADDRESS)	The Villages	Florida	32162
		*****	<u> </u>	
Enter new mailing address, if applicable:			ALL ARE	SSE TO
Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>		(A)	3 5 5
			-m ₁	
(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 42913 and assigned dorida document number 13000061870. this amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: AR Home Services L.C. the new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation L.C." Inter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) The Villagus Florida 32162 Mailing address MAY BE A POST OFFICE BOX)				
Name of New Registered Agent:	MARK	E MURPHY	(CPA	<u> </u>
		TEPHANIE COU	RT	
	LAKE M			
		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 Title · **Name Address** Type of Action Add Remove Remove Remove Tarakina E Add Remove Remove Add Remove

lf am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	FEDERAL 10 # 46-2653717
• •	
d	Sept. 5, 2013.
·	Signature of a member or authorized representative of a member
	Titloria Whiteley Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00