## L1300061182

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<del>+</del> )
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
Ĺ	JUL!1 5 2013	
	. SELLERS	

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June 27, 2013

WILLIAM AUSTIN JR 415 HORNBILL PLACE WINTER SPRINGS, FL 32708

SUBJECT: HOME-REJUVENATION, LLC

Ref. Number: L13000069182

We have received your document for HOME-REJUVENATION, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 213A00016118

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJE	CT:	Home-F	Rejuvenation, LLC	
		Name of Limit	ted Liability Company	
The cn	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			William W. Austin, JR	
			Name of Person	
		Ho	me-Rejuvenation, LLC	
			Firm/Company	<del>,</del>
			415 Hornbill Place	
			Address	
		Winte	r Springs, Florida 32708	
			City/State and Zip Code	
			kaustin@yahoo.com	
		·	o be used for future annual report notificati	ion)
For furt	ther information co	oncerning this matter, please of	All:	
	Williar	n W. Austin	at (407 ) 620-5584	
	Name of	Person	Area Code & Daytime Te	elephone Number
Enclose	ed is a check for th	e following amount:		
\$25	.00 Filing Fec	☐\$30.00 Filing Fec & Certificate of Status	□\$55.00 Filing Fec & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fec, 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
Clitton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Home-R	lejuvenation, LLC	
( <u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Co.	mpany were filed on 5/10/2013 and assigne	d
Florida document number <u>L13000069182</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbre	viation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	(SS)	<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addre	red office address on our records, <u>enter the name of the</u> ss here:	e new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	City Zin 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>	Name	Address	Type of Action
MGRM	John M.K. Austin	695 Chelsea Rd	Add
		Longwood, FL 32750	Remove
			Add
			Remove
			Add
		Remove	
	,	Add	
		Remove	
		Add	
		Remove	
	·	FILED  13 JUL 72 AM 8: 01  SECRETARY DE STATE TAULANA SSEE: FLORIB	
		•	FLORIDE C

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	7-9-2013
	Signature of a member or authorized representative of a member
	William W. Austin, Jr
	Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00