

L13000075375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

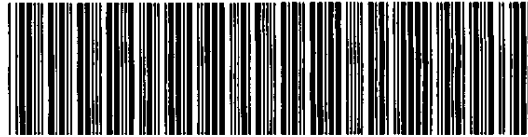
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 SEP 28 PM 1:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 29 2015

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HELP AT HOME FRANCHISE SERVICE, 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:

Ashly Luckose

Name of Person

Help at Home Franchise Service, LLC

Firm/Company

354 NE 1st Ave

Address

Delray Beach, FL 33444

City/State and Zip Code

Legal@preferhome.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashly Luckose

561 404-2929
at ()
Area Code Daytime Telephone Number

Name of Person

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

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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>	<u>Type of Action</u>
MGRM	BETHABARA GROUP LIMITED	10808 AVENIDA SANTA ANA	<input type="checkbox"/> Add
		BOCA RATON, FL 33498	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	FRANK GUERRIERI	354 NE 1ST AVE	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33444	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	JODY GUERRIERI	354 NE 1ST AVE	<input checked="" type="checkbox"/> Add
		DELRAY BEACH, FL 33444	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Sept 22, 2015

Frank Guerrieri

Typed or printed name of signee