U13000084517

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COVER LETTER

TO: Registration So Division of Cor					
SUBJECT: 114	Urquhart, LLC				
	Name of Lim	ited Liability Company			
	Amendment and fec(s) are sub	<u>-</u>			
	Kathlein Am	bridge			
	· · · · · · · · · · · · · · · · · · ·	Name of Person			
	Blissful Hom	ne Services, Inc.			
	**************************************	Firm/Company			
	279 NE 2nd	Ave.	i t r	2014 MAR 2 SEGRETATION AND AND AND AND AND AND AND AND AND AN	in strong (+= +
		Address		語音	**************************************
	Delray Beac	h, FL 33444	t :	協会 一	r
	teamambridge@g	City/State and Zip Code mail.com to be used for tuture annual report notifi	ication)	PK 12: 36	<u> </u>
For further information c	oncerning this matter, please of			COM ST	
Kathlein Ar		_561 330-60	065		
	t Person	at ()	: Telephone Number	-	
		-			
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee Certificate of St Certified Copy (additional copy is c	atus &	

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

114 Urquhart,				
(Name of the Limited Liability Company (A Florida Limited Lia	s as it now appears on our records.) ability Company)	· · · · · · · · · · · · · · · · · · ·		
The Articles of Organization for this Limited Liability Company w Florida document number <u>L13000086517</u> .	vere filed on <u>06/14/2013</u>	and a	ssigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ty company here:			
The new name must be distinguishable and end with the words "Limited Liabili	ity Company," the designation "LLC" or the	abbreviation	"L.L.C."	_
Enter new principal offices address, if applicable:		remet St. Sec	21	
(Principal office address MUST BE A STREET ADDRESS)			F	
		並高	夢	
		第	\(\sqrt{\sq}}\ext{\sqrt{\sq}}}}}}}}\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	
Enter new mailing address, if applicable:			—— ——	į,
		rr do		
(Mailing address MAY BE A POST OFFICE BOX)		<u>(154-4</u>	<u>12</u>	
		<u> </u>	<u>သ</u> —စာ	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	· ——	the name	of the	: new
Name of New Registered Agent:			<u>-</u>	
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 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Joseph Feldkamp	279 NE 2nd Ave., Delray Beach, FL 33444	🗆 Add
			■ Remove
MGRM	Kathlein Ambridge	279 NE 2nd Ave., Delray Beach, FL 33444	Add
			■ Remove
MGRM	Blissful Home Services, Inc.	279 NE 2nd Ave., Delray Beach, FL 33444	STORE AND THE ST
			Addr 21 Change
			□ Add
			□ Remove
			□ Remove
			□ Remove

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

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