

L13 000 137212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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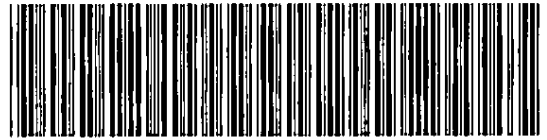
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** The Agency, 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:

Michelle Diaz

Name of Person

Firm/Company

2719 Hollywood Blvd, Ste #5099

Address

Hollywood, FL 33020

City/State and Zip Code

beaconcarestaffingagency@gmail.com

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

For further information concerning this matter, please call:

Michelle Diaz

Name of Person

at ( 954 ) 552-9390

Area Code

Daytime Telephone Number

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

THE AGENCY, LLC

(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 09/30/2013 and assigned Florida document number L13000137212.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Beacon Care Staffing Agency, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

2719 Hollywood Blvd,

Ste #5099

Hollywood, FL 33020

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2719 Hollywood Blvd,

Ste #5099

Hollywood, FL 33020

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Michelle Diaz

New Registered Office Address:

2719 Hollywood Blvd, Ste #5099

*Enter Florida street address*

Hollywood

*City*

, Florida 33020

*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**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michelle Diaz	2719 Hollywood Blvd,	<input type="checkbox"/> Add
		Ste #5099	<input type="checkbox"/> Remove
		Miami Beach, FL 33020	<input checked="" type="checkbox"/> Change
AMBR	Sabrina Telemaque	2719 Hollywood Blvd,	<input checked="" type="checkbox"/> Add
		Ste #5099	<input type="checkbox"/> Remove
		Miami Beach, FL 33020	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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(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.

Signature of a member or authorized representative of a member

Typed or printed name of signee