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2013 OCT 23 PM 5:37  
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HALL AMHERST MA 01003

OCT 24 2013

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RODGER'S HOME SERVICES, L.L.C.

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SINDY PHILLIPS  
Name of Person

RODGER'S HOME SERVICES, L.L.C.  
Firm/Company

1112 CHANDLER DRIVE  
Address

COOPER CITY, FLORIDA 33026  
City/State and Zip Code

RPHILL112351 @ YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RODGER PHILLIPS at (954) 559-5265  
Name of Person Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee    ☒ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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2018 OCT 23 PM 5:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
RODGER'S HOME SERVICES, L.L.C.

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

"MGR" MANAGER: RODGER D. PHILLIPS - IS INCORRECT  
"MGR" MANAGER: SINDY PHILLIPS (CORRECT NAME)  
1112 CHANDLER DRIVE  
COOPER CITY, FL. 33026

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: October 20, 2013

Sindy Phillips  
Signature of a member or authorized representative of a member

SINDY PHILLIPS  
Typed or printed name of signee

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**

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2013 OCT 23 PM 5:37  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

RODGER'S HOME SERVICES, L.L.C.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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13 OCT 15 PM 4:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

**Mailing Address:**

11112 CHANDLER DRIVE  
Cooper City, FL 33026

11112 CHANDLER DRIVE  
Cooper City, FL 33026

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

SINDY PHILLIPS  
Name

11112 CHANDLER DRIVE  
Florida street address (P.O. Box **NOT** acceptable)

Cooper City FL 33026  
City, State, and Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..*

Sindy Phil  
Registered Agent's Signature (REQUIRED)

**(CONTINUED)**

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

RODGER D. PHILLIPS  
1112 CHANDLER DRIVE  
COOPER CITY, FL. 33026

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

Rodger D. Phillips / Sandy Phillips  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Rodger D. Phillips / Sandy Phillips  
Typed or printed name of signer

**Filing Fees:**

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)