

L140000 18126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

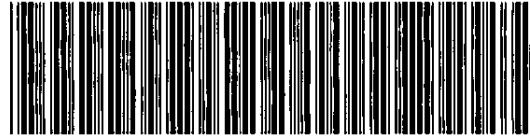
(Business Entity Name)

(Document Number)

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MAR 25 2015  
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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BETTERCARE 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:

**LINDA L. CURTIS**

Name of Person

**BETTERCARE LLC**

Firm/Company

**2905 FRUITWOOD LANE**

Address

**JACKSONVILLE, FL 32277**

City/State and Zip Code

**LINDACURTIS2@AOL.COM**

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

For further information concerning this matter, please call:

**LINDA L. CURTIS**

**904 504-2389**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

**ARTICLES OF AMENDMENT**  
**to**  
**ARTICLES OF ORGANIZATION**  
**of**  
**BETTERCARE LLC**  

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**(A Florida Limited Liability Company)**

The Articles of this Limited Liability Company were filed on **February 3<sup>rd</sup> 2014** and assigned Florida document number **L14000018126**.

This Amendment is submitted to amend the following:

**A. Amendment to ARTICLE IV – Name and address of person(s) authorize to manage the LLC:**

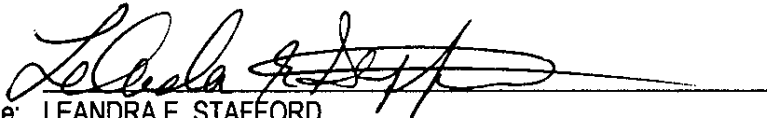
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LINDA L. CURTIS	2905 FRUITWOOD LANE JACKSONVILLE, FL 32277	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	LEANDRA E. STAFFORD	11749 FITCHWOOD CIR JACKSONVILLE, FL 32258	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

Dated MARCH 23<sup>RD</sup> 2014

Signature

Printed Name: LEANDRA E. STAFFORD

Title: MGR



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