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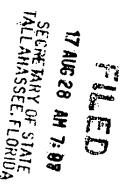
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Oc. oHs Home Name of Limit	Services LLC ted Liability Company	L15000001202
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
	Scott Re	in holdt Name of Person	
	Scots	Home Services L Firm/Company	LC
	2811 Hunte	Address A	pt. 101
	Apoples	FL. 32703 City/State and Zip Code	
	Scotts ho E-mail address: (u	o be used for future annual report notific	ao. Coin ation)
For further information c	oncerning this matter, please ca	lt:	
Scott 1.	Rein holdt f Person	at (407) 274 Area Code Daytime	-859/ Telephone Number
Enclosed is a check for the	ne 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Scotts Home	Services, LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) hability Company)
The Articles of Organization for this Limited Liability Company Florida document number 4/500000 / 202.	were filed on and assigned
This amendment is submitted to amend the following:	
is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: enew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." atter new principal offices address, if applicable: 28 Hunke Lake Way	
The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	2811 Hunter Lake Way
(Principal office address MUST BE A STREET ADDRESS)	Apt. 101
Enter new mailing address, if applicable:	28/1 Hunter Lake Way
(Mailing address MAY BE A POST OFFICE BOX)	Apt. 101
	Apop Ks, FL. 32703
registered agent and/or the new registered office address nero	SEE TALL.
Name of New Registered Agent:	
New Registered Office Address:	SA No man
	Enter Florida street address
 	City Florida City
New Registered Agent's Signature, if changing Registered Agent:	RATE

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 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 **Type of Action** Title <u>Name</u> **Address** Susan Goldherg 210 W. Lumberland Circle Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change □ Add ☐ Remove _□ Change □ Add ☐ Remove _□ Change

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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or lote: If the date inserted in this block does not meet the applicable statutory filing ocument's effective date on the Department of State's records.	(optional) more than 90 days after filing.) Pursuant to 60 ing requirements, this date will not be lis	– 05.0207 (sted as t
e record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	e time, at 12:01 a.m. on the earl	lier of:
pated 08/24/2017		

Page 3 of 3

Filing Fee: \$25.00