

L15000151379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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17 FEB 13 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

FEB 14 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2017

SARAH STEVEN
12935 VIOLINO LN #107
NAPLES, FL 34105

SUBJECT: HELP AWAY FROM HOME, L.L.C.
Ref. Number: L15000151379

We have received your document for HELP AWAY FROM HOME, L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE FILL OUT SECTION B OF APPLICATION SINCE YOU'RE CHANGING THE LAST NAME.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 517A00001788

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TALLAHASSEE, FLORIDA

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

Help Away From Home, 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 9/3/2015 and assigned Florida document number L15000151379.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

New Registered Office Address:

Sarah D. Steven

12935 Violino Ln #107

Enter Florida street address

Naples

City

Florida

34105

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.

Sarah D. Steven

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

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TALLAHASSEE, FLORIDA

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

Registered Agent stays the same person & address so RA last name is the only change. Was formally Sarah Ball and is now Sarah Steven. Was recently married.

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E. Effective date, if other than the date of filing: 1/19/17 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated Jan. 19, 2017.

Sarah D. Steven

Signature of a member or authorized representative of a member

Sarah D. Steven

Typed or printed name of signee