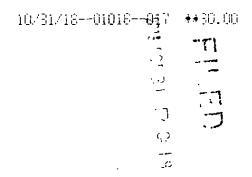
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(Re	questor's Name)	
- (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	■ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer	
Special instructions to	riming Officer.	

Office Use Only



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COVER LETTER

FO: Registration Se Division of Cor				
	OME CARE OF SOUTH FLO	RIDA, LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	SHAWNTREL KNIGHT			
	TRUST KNIGHT PROPE	Name of Person RTY MANAGEMENT, INC		
	6026 WEEPING BANYA	Firm/Company N LANE		
	WOODLAND HILLS, CA	Address 91367		9 8
	SKNIGHT80@HOTMAIL.	City/State and Zip Code COM		
		to be used for future annual report noti	fication)	
For further information of SHAWNTREL KNIGH	concerning this matter, please corrections and the concerning this matter, please corrections are concerning the concerning the concerning this concerning the concerning this	att: 954 394-2869		
Name c	of Person	at ()	e Telephone Number	<u> </u>
Enclosed is a check for t	he following amount:			
S25,00 Filing Fee	30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Certificate of Certified Co (additional cop	of Status & py
Regist Divisi P.O. F	ANG ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co	on rations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SENIOR HOME CARE OF SOUT	TH FLORIDA, LLC	
(Name of the Lim	ited Liability Company as it now appears ((A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited I Florida document number L15000177710	Liability Company were filed on 01/31	and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company here	F: - F
The new name must be distinguishable and contain the	words "Limited Liability Company," the desi	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE.	ET ADDRESS)	نمَّه،
-		
		±0 71
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	(BOX)	
3. If amending the registered agent and registered agent and/or the new registered of	• • • • • • • • • • • • • • • • • • • •	our records, <u>enter the name of the</u>
Name of New Registered Agent:	GLORIA JUMPP	
New Registered Office Address:	6308 S.W. 27TH STREET	
-	Enter Florid	a street address
	MIRAMAR	, Florida 33025
	City	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

or removed from our records: MGR = Manager AMBR = Authorized Member **Address** Type of Action Title Name RYAN DILLON 6308 SW 27TH STREET AMBR MIRAMAR, FL 33025 **■** Add □ Remove ☐ Change 6308 SW 27TH STREET AMBR MIRAMAR, FL 33025 🗷 Add ☐ Remove ☐ Change MGIR _□ ∧dd Remove ☐ Change □ Add . 7 .□ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove _□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

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Note:	ve date, if other than the date of filing: 10 15 2018 (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date vent's effective date on the Department of State's records.	Pursuant to 605,0207 vill not be listed as
The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of 90th day after the record is filed.	n the earlier o
Dated _	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00