

LI6000198504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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FILED
17 JUN 16 11:05
FBI/DOJ/SEC/ST/DOJ

SCOTT

JUN 20 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3-2-1 Home Inspections
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:

David A. Nance
Name of Person

3-2-1 Home Inspections
Firm/Company

350 Fillmore ave apt. F16
Address

Cape Canaveral FL 32920
City/State and Zip Code

Dnance 475@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erin Ramirez at (321) 458-7596
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

FILED
JUN 16 11:05
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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

3-2-1 Home Inspections

(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 _____ and assigned
Florida document number L16000198504.

This amendment is submitted to amend the following:

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

Nance Home Improvement L.L.C.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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) _____

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: _____

Enter Florida street address

_____, Florida

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

MGR = Manager
AMBR = Authorized Member

~~ER~~
~~AAS~~
AMBR

Erin Ramirez

<u>Address</u>	<u>Type of Act</u>
3570 Fillmore Ave Apt 118 Cape Canaveral FL 32930	add
	<input type="checkbox"/> Remove

☐ Remove

 ☐ Change

☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add

Remove

☐ Change☐ Add☐ Remove☐ Change

☐ Add

☐ Remove☐ Change

100-443887-100

[illegible]

(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)

(b) The 90th day after the record is filed.

June 13, 2017

Signature of a member or authorized representative of a member

David Nance

Typed or printed name of signer

FILED
JUL 16 1956
17