

L170000 70511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

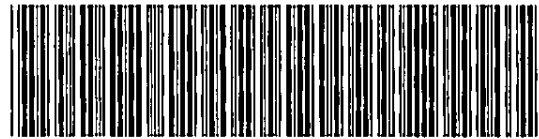
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ki Zomba B A Fitness 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:

Suvenes Blanc

Name of Person

Ki Zomba B.A Fitness LLC

Firm/Company

3411 16th St. E

Address

Brackenton FL 34208

City/State and Zip Code

findinghopehomecarellc@gmail.com

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

For further information concerning this matter, please call:

Angelina Santos at (941) 465-3163
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PAID!



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2020

SUVENES BLANC ***2ND MAILING***
3411 16TH STREET E
BRADENTON, FL 34208

SUBJECT: KI' ZOMBA R A FITNESS, LLC
Ref. Number: L17000070511

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 220A00006117



APR 01
2020 11:11 AM

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 20, 2020

SUVENES BLANC
257 34TH AVENUE DRIVE E
BRADENTON, FL 34208

SUBJECT: KI' ZOMBA R A FITNESS, LLC
Ref. Number: L17000070511

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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Claretha Golden
Regulatory Specialist II

Letter Number: 220A00006117

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Ki Zomba R A Fitness 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 3/28/17 and assigned
Florida document number L17000070511

This amendment is submitted to amend the following:

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

Finding Hope Home Care LLC

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)

3411 16th St E
Bradenton FL 34208

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3411 16th St E
Bradenton FL 34208

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:

Suvenes Blanc

New Registered Office Address:

3411 16th St E

Enter Florida street address

Bradenton

City

Florida

34208

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.

Suvenes Blanc
If Changing Registered Agent, Signature of New Registered Agent

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

Dated

Signature of a member or authorized representative of a member

Suvenes Blanc
Typed or printed name of signee