

L17000073014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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O SIMMONS
APR 19 2017

Freedom Home Companion Services
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Page 1 of 3

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Nilza I. Rivera	3420 NW 112 Coral Springs Florida 33065	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please add Nilza I. Rivera Address: 3420
NW 112 terrace, Coral Springs, Fl. 33065 as
50% owner. Telephone # 954-729 5230

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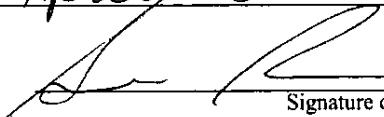
E. Effective date, if other than the date of filing: same as before (optional)

(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 April 13, 2017.



Signature of a member or authorized representative of a member

SANTIAGO RIVERA

Typed or printed name of signee