

L17000169501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

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☐

MAIL

(Business Entity Name)

(Document Number)

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Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 7, 2017

RUBY HUNTER
3639 VICTORIA MANOR DR D 104
LAKELAND, FL 33805

SUBJECT: RUBYS TOTAL TENDER CARE, LLC
Ref. Number: L17000169501

We have received your document for RUBYS TOTAL TENDER CARE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

SIGNATURE PAGE IS MISSING

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 117A00024772

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Rubys Total Tender Care, 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:

Ruby Hunter

Name of Person

Rubys Total Tender Care, LLC

Firm/Company

3639 Victoria Manor Drive D-104

Address

Lakeland, Florida 33805

City/State and Zip Code

rubystotaltendercare@outlook.com

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

For further information concerning this matter, please call:

Ruby Hunter

863

838-3702 or 863-581-5827

at (_____) _____

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

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

Rubys Total Tender Care, 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 09/08/2017 and assigned
Florida document number L17000169501.

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:

3639 Victoria Manor Drive - D104

(Principal office address MUST BE A STREET ADDRESS)

Lakeland, Florida 33805

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:

Ruby Hunter

New Registered Office Address:

3639 Victoria Manor Drive - D104

Enter Florida street address

Lakeland, Florida

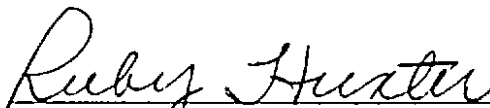
, Florida 33805

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

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	Desiree L. Carpenter	206 John Carroll Road East	<input type="checkbox"/> Add
		Lakeland, Fl. 33801	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Monique L. Hunter	4240 Summer Landing Dr.	<input type="checkbox"/> Add
		Lakeland, Fl 33810	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Ruby Hunter		<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

7-11-80 AM 3:40

77-17-0 | At | B: 4

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.

Dated 12/07/17

Ruby Hunter
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Typed or printed name of signee