

L17000207862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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AUG 11 2018

S. YOUNG

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Caring Hearts of West Florida 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:

Terry Dean Baker

Name of Person

Affinity Home Care Services

Firm/Company

4142 Mariner Blvd #154

Address

Spring Hill, Florida 34609

City/State and Zip Code

affinityhomecareservicesllc@gmail.com

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

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For further information concerning this matter, please call:

Marshay Thaxton

352 346-6830
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**

Caring Hearts of West Florida 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 10/09/2017 and assigned Florida document number L17000207862.

This amendment is submitted to amend the following:

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

Affinity Home Care Services 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)

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

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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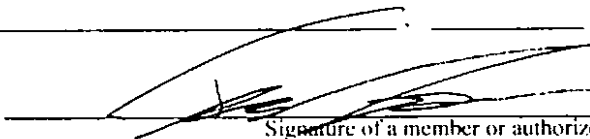
E. Effective date, if other than the date of filing: _____ (optional)

(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 _____



Signature of a member or authorized representative of a member

Terry Dean Baker

Typed or printed name of signee

DO 1ST



Business Name Change

Business owners and other authorized individuals can submit a name change for their business. The specific action required may vary depending on the type of business. If the EIN was recently assigned and filing liability has yet to be determined, send Business Name Change requests to IRS-Stop 343, Cincinnati, OH 45999.

In some situations a name change may require a new Employer Identification Number (EIN) or a final return. See Publication 1635, Understanding Your EIN, to make this determination.

Follow the chart below to determine who the authorized individual is to make the business name change for your type of business:

Individuals Topics

- Tools
- Taxpayer Advocate
- Affordable Care Act

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Type of Business	Action Required
Sole Proprietorship	<p>Write to us at the address where you filed your return, informing the Internal Revenue Service (IRS) of the name change.</p> <p>Note: The notification must be signed by the business owner or authorized representative.</p>
Corporation	<p>If you are filing a current year return, mark the appropriate name change box of the Form 1120 type you are using:</p> <ul style="list-style-type: none">• Form 1120: Page 1, Line E, Box 3• Form 1120S: Page 1, Line H, Box 2 <p>If you have already filed your return for the current year, write to us at the address where you filed your return to inform us of the name change. In addition:</p> <ul style="list-style-type: none">• The notification must be signed by a corporate officer.
Partnership	<p>If you are filing a current year Form 1065, mark the appropriate name change box on the form: Page 1, Line G, Box 3.</p> <p>If you have already filed your return for the current year, write to us at the address where you filed your return to inform us of the name change. In addition:</p> <ul style="list-style-type: none">• The notification must be signed by a partner of the business.

- Does not state how long it will take.
- NO charge.