

L17000208198

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000321595 3)))



H170003215953ABCD

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
EXCEPTIONAL CARE AND HANDS LLC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

FILED
17 DEC -7 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H17000321595

Articles of Amendment to LLC Articles of Organization of

Exceptional CARE AND HANDS LLC.

The Articles of Organization for this Limited Liability Company were filed on
10/09/17 and assigned Florida document number
L17000808198.

This amendment is submitted to amend the following:

Change all address to: 205 NORTHEAST 13 AVE
BOYNTON BCH FLORIDA 3343

Remove: COURTNEY, Cain

Change Company name to:
Exceptional CARING HANDS LLC.

These articles of amendment were adopted on 12/7/17

Dated 12/7/17

Raquel Hillines
Signature of a member or authorized representative of a member

Raquel Hillines
Typed or printed name of signee

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Raquel Hillines
Signature of New Registered Agent, if changing

FILED
17 DEC -7 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H17000321595