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COVER LETTER

TO:	Registration Sect Division of Corpo		٠.	. · ·
SUBJI	ест: Нача	is Home I	MOY OVEMENTS ted Libbility Company	LLC
The en	nclosed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please	return all correspond	lence concerning this matter t	o the following:	
		Joshu	a Harais Name of Person	
			Firm/Company	.
		43 FO	rmby St.	
		JOSHNAN JE-mail address: (to	City/State and Zip Code Code S 89 @ M 0 o be used for future annual eport notion	(L. COM
For fu	rther information cor	cerning this matter, please ca	11:	
	Ioshua	Hargis	ar (850) 420	-5491
	Name of F	rerson	Area Code Daytime	e Telephone Number
Enclos	sed is a check for the	following amount:		
□ \$ 2	5.00 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

1.1

Harais Home (Name of the Limited Liability)	LMDY OVEME	r records.)
The Articles of Organization for this Limited Liability C	Company were filed on 11.0	9.2017 and assigned
This amendment is submitted to amend the following:	submitted to amend the following: me, enter the new name of the limited liability company here: distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" al offices address, if applicable: dress MUST BE A STREET ADDRESS) address, if applicable: LAY BE A POST OFFICE BOX) the registered agent and/or registered office address on our records, enter the name of the new addor the new registered office address here:	
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designat	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	Ğ.
	<u> </u>	2
		:
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	et address
		, Florida
	City	

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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address Type of Acti	ion
MBR	Tiffany Hargis	43 Formby St. Freeport, FL 32439	
	·	Remove	
		Change	
		□ Add	
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ffective da	ate, if other than the date of filing:	(optional)
	date is listed, the date must be specific and cannot be prior to date of filing date inserted in this block does not meet the applicable statutory	
	effective date on the Department of State's records.	
e record	specifies a delayed effective date, but not an effective	ve time, at 12:01 a.m. on the earlier o
	n day after the record is filed.	·
ated .	14.2018	
	$\alpha i \beta$	
_	Signature of a member or authorized represent	ative of a member
	1801 11 11	

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Filing Fee: \$25.00