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N COOPER APR 04 2018

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Wunde	rful Home 9 Name of Lim	ervices LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Luke P. L	Jun Jer Name of Person	
	Wunderful	Home Services 16	<u>C</u>
	16620 6	Jishria DRIVE Address	
	Wonderful E-mail address: (1	City/State and Zip Code Home Services (a) et o be used for future annual report notifie	908 gma:1.Com cation)
For further information c	oncerning this matter, please ca		
Luke Wood Name o	f Person	at (239) 258-6 Area Code Daytime	7322 Telephone Number
Enclosed is a check for the	ne 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

(Name of the Limited	Home Liability Con Florida Limit	Serv mpany ted Liab	i CeS as it now a oility Comp	LLC ppears on any)	our records.)		
The Articles of Organization for this Limited Liab Florida document number <u>L 180000 521</u> 7	•	any we	ere filed o	n <u>2/2</u>	27/2018	3	and assig	gned
This amendment is submitted to amend the follow	/ing:							
A. If amending name, enter the new name of th	he limited l	<u>iabilit</u>	y compai	ny here:				
The new name must be distinguishable and contain the word	ds "Limited L	iability	Company,"	the design	ation "LLC"	or the abbrev	iation "L.L.	.C."
Enter new principal offices address, if applicab	ole:	_						7s
(Principal office address MUST BE A STREET)	<u>ADDRESS</u>	2 _		· · · · · · · · · · · · · · · · · · ·			8 #PR	LCH CHE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>	- - -					R-3 AM 9: 31	TARY OF STATE
B. If amending the registered agent and/or registered agent and/or the new registered office			e addres	s on oui	records,	enter the	name of	f the new
Name of New Registered Agent:								
New Registered Office Address:			Ente	r Florida st	reet address			
			0.		, Flor	rida	Zip Code	
			City			2	.ip 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 A	thorized Person(s) authorized to manage, enter the title, name, and address of each person being added our records:				
MGR = Man AMBR = Aut	nager . horized Member				
<u>Title</u>	Name	Address	Type of Action		
AMBR	Corey Wood	16620 Wisteria Drive	🗆 Add		
		16620 Wisteria Drive Fort Myers , FL 33908	IZ Remove		
			Change		
			Add		
			□ Remove		
			Change		
			□ Add		
			Remove		
			_□ Change		
	Mary		_□ Add		
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fective date, if other t				(option	
n effective date is listed, the te: If the date inserted	e date must be specific an in this block does not	id cannot be prior to meet the applical	o date of filing or m ble statutory filing	ore than 90 days after f g requirements, this	iling.) Pursuant to 605.03 date will not be listed
cument's effective date	on the Department of	State's records.		•	
record specifies a The 90th day after			an effective t	me, at 12:01 a.	m. on the earlier
The sour day dicer	are record is med	•			
ted March Guarte	- in/f/ 3/28	2018			
ted Mach twenty		, 2010	 '		
Jake of	later				
77 70	Signature of a	member or author	ized representative	of a member	

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Filing Fee: \$25.00