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NVISION OF CORFORNIONS

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#### **COVER LETTER**

то:	Registration Division of	n Section Corporations			
()		ro Solutions OF FL LLC			
SUBJE	:C1:	Name of Limi			
The end	closed Articles	s of Amendment and fee(s) are subr	mitted for filing.		
Please	return all corre	espondence concerning this matter t	to the following:		
		Kathy Roussis			
		Homepro Solutions OF FL L	Name of Person		
		375 Wood Bridge Ave	Firm/Company	<del></del>	
Address Tarpon Springs, FL 34689			<del></del>		
		krworkline@gmail.com	City/State and Zip Code		***
		E-mail address: (t	to be used for future annual report notific	cation)	<u></u> (3)
For fur	ther information	on concerning this matter, please ca	ill:	1	
Paul F	Roussis		727 687-7606		
	Naı	me of Person	Area Code Daytime	Telephone Number	F STATE F ORALID TH 3: 50
Enclose	ed is a check f	or the following amount:			<u> </u>
<b>■ \$2</b> :	5.00 Filing Fe	e \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fer Certificate of St Certified Copy (additional copy is a	tatus &

MAILING ADDRESS:

TO:

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

Homepro Solutions OF FL LLC		
(Name of the Limi	ted Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) ny)
The Articles of Organization for this Limited L Florida document number L18000154099	iability Company were filed on	June 21, 2018 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability compan	<u>v here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," t	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	So Co
E-4 in mailing address if amplicables		- <del> </del>
Enter new mailing address, if applicable:	. 0.00	7 25
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	9 FF
B. If amending the registered agent and	Var registered office address	on our records, enter the name of the ne
registered agent and/or the new registered (	office address here:	<u> </u>
Name of New Registered Agent:	Angela Johnson	
New Registered Office Address:	2245 Springrain Dr.	Florida street address
	Clearwater	Florida 33763 Zip Code
	City	гір соае

#### 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.

Ungela JUMILIM

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>	Type of Action
	Paul Roussis	375 Wood Bridge Ave	
MGR			Add
		Tarpon Springs, FL 34689	
			C Remove
			Change
			<del></del>
			☐ Remove
			<del></del>
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tive date, if other than t flective date is listed, the date r If the date inserted in this ment's effective date on the	nust be specific and car block does not meet	nnot be prior to dat t the applicable s	e of filing or more tha statutory filing requ	(optional) n 90 days after filing.) Pur irements, this date will	suant to 605.0 not be listed
cord specifies a delay e 90th day after the r	ed effective date ecord is filed.	e, but not an	effective time,	at 12:01 a.m. on t	:he earlie
March 26		2019			
Nath 1	Signature of a men	<del></del>			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00