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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Destiny Home Solutions, 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:	
Renee Mc Connell Name of Person	
Destiny Home Solutions, LLC	
5790 W. IST Sq. SW	
Vero Beach, F_32968  City/State and Zip Code  Cenee Mcconnell@vocketmail: Ce  E-mail address: (to be used for future annual report notification)	  n
For further information concerning this matter, please call:	
Renee McConnell at (772), 559-0585  Name of Person at (772), 559-0585  Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee \& Certificate of Status \$\Bigcup \\$55.00 Filing Fee \& Certificate of Status \$\Bigcup \\$60.00 Filing Fee. \$\Bigcup	

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

FILED

2019 JAH 22 PH 12: 20 The Articles of Organization for this Limited Liability Company were filed on Jan. 10, 2019 Florida document number <u>L 1900012219</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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.

Page 1 of 3

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 **Address** Type of Action Title Name Renee McConnell 5790 w 1st Sq. Sw □ Remove ☐ Change 🗖 Add .□ Remove ☐ Change □Àdd □ Remove ☐ Change \_□ Add<sup>†</sup> \_□ Remove ☐ Change □ Add ☐ Remove \_□ Change \_□ Add ☐ Remove

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Filing Fee: \$25.00