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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Homeron Landscaping 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:	
Jamie Dean Name of Person	
Homerun Landscaping LLC Firm/Company	
15386 Fleetwood RD. Address	
Weeki Wachee, FL 34614 City/State and Zip Code	
Jamie 122374 D. Jahoo, Com E-mail address: (to be used for future annual report notification)	7
For further information concerning this matter, please call:	Per
Tamie Dean at (352) 238-2778 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	•
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$	

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 Liability Compar (A Florida Limited L	ny as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L 1900019 282</u> .	were filed on January 17, 2019 an	d assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		1
		1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		1
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	<u> </u>	ane of the new
Name of New Registered Agent:		28
New Registered Office Address:	11 c	P M
	Finter Florida street address 50	三55
	City Zip C	ode .
New Registered Agent's Signature, if changing Registered Agent:	·	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as placing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familia provided for in Chapter 605, F.S. Or, if this	r with and document is
If Chan	oging Registered Agent. Signature of New Registered	Agent

If amending or removed	Authorized Person(s) authorized to m from our records:	nanage, enter the title, name, and address of	feach person being added
MGR = M AMBR = A			
<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	Corey D Yales	3213 Blythe Ave	
		3213 Blythe Ave Spring Hill, FL 3460	Remove
			□ Change
	R = Authorized Member		
			□ Remove
			Change
			Add
		 	Remove
			Change
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			Deremove P
			Change 5
			□ Add
			Remove
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			Remove
			Change

amending any other information, enter change(s) here: (Attach additional sheets, if i	necessary.)		
		 	
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an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days		ant to 605.02	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, ocument's effective date on the Department of State's records.	, this date will n	ot be listed :	as
)		- e
e record specifies a delayed effective date, but not an effective time, at 12:0 The 90th day after the record is filed.)1 a .m. on tr	ie eanier	OI
Ta			
ated January 25 2019.			
Signality Cof a member of authorized representative of a member			
Jamie & Jean		1	

Page 3 of 3

Filing Fee: \$25.00