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SUCREAPY OF STAIL
ALLAHASSLE, FLORIDA

MAR 2 1 2013

T. LEMIEUX

## **COVER LETTER**

Divi	sion of Corp	orations		
SUBJECT:	Milly's Hous	ing Services LLC		
		Name of Limi	ted Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return	all correspond	Jence concerning this matter t	o the following:	
		Luz Peredo		
			Name of Person	
		Milly's Housing Services L	I,C	
		<u> </u>	Firm-Company	<del></del>
		1720 Elmstead Ct		
			Address	<del></del>
		Orlando, FL 32824		
		ancirodriguez <i>iā</i> hotmail.com	City State and Zip Code	
		•	o be used for future annual report notific	ration)
For further in	formation cor	ncerning this matter, please ca	<b>\</b> t:	
Luz Peredo			407 990 2563	
	Name of I	<sup>9</sup> erson	at () Area Code Daytime [	l'elephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 Fi	ling Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60,00 Filing Fee,
	·	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clafton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



MILLY'S HOUSING SERVICES, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 2013 HAR 11 A 11: 39

The Articles of Organization for this Limited Liability Company	were filed on $\frac{02/25/20}{}$	O19 SECRETARY OF and assigned TALLAHASSEE, FLORIDA
Florida document number 1.19000054687		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	<del></del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		records, enter the name of the new
Name of New Registered Agent:	<del> </del>	
New Registered Office Address:		
	Enter Florida sti	eet address
		Florida
	City	Zip 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 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
AMBR	LUZ PEREDO	1720 ELMSTEAD CT, ORLANDO , FL 32824	Add
			Remove
			Change
MGR	LUZ PEREDO	1720 ELMSTEAD CT, ORLANDO , FL 32824	■ Add
			Remove
			Change
			Add
			□ Remove
			Change
			Add
		<del></del>	Remove
			Change
			□ Add
		<del></del>	Remove
			Change
<del></del>			
			☐ Remove
			Change

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ated	signature of a member or and extred representative of a member
ated MARCH, 7	