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D SCOTT

JUN - 6 2019

#### **COVER LETTER**

Divi	sion of Corp	porations			
SUBJECT:	A Home Plu	s Services LLC			
SOBJECT.		Name of Lim	ited Liability Company		
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspor	ndence concerning this matter	to the following:		
		Yandi Liste			
			Name of Person		
		A Plus Home Services LLG	C		₩
			Firm/Company		3 . ~;
		2061 43rd Ter SW			
			Address		ີ .
		Naples, Fl 34116			. 79 1 79
		cruzya2006@yahoo.com	City/State and Zip Code		. 3
		E-mail address: (	to be used for future annual report notifi	cation)	
For further in	formation co	oncerning this matter, please ca	all:		
Yandi Liste			239 200-1816 at ( )		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed is a	check for th	e following amount:			
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	of Status &

MAILING ADDRESS:

TO:

**Registration Section** 

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

A plus home Services LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 04/15/2019	and assigned
Florida document number L19000103476		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2061 43rd Ter SW	
(Principal office address MUST BE A STREET ADDRESS)	Naples, Fl 34116	
		: :
		) · · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	2061 43rd Ter SW	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	Naples, Fl 34116	<u> </u>
		3
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	Naples, Fl 34116  ffice address on our records, e	.5
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	la
<del></del>	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 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>	Address	Type of Action
AP	Jorge I. Liste	5431 30th Ave SW	
		Naples, Fl 34116	_
			■ Remove
			☐ Change
	Yoandy Ponce	10585 Noahs Cir Apt 321	Change
ΑP			
		Naples, Fl 34116	
			Remove
			Change
<del></del>			
			Remove
			) Change
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			Add
			7.3
			☐ Remove
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			Change
			<u> </u>
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			Remove
			☐ Change

A Plus Home Services LLC	
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fective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of filing or  ote: If the date inserted in this block does not meet the applicable statutory fil  cument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier
ited	
Signature of a member or authorized representati	

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Filing Fee: \$25.00