

L19000 111091

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(Business Entity Name)

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MAY 17 AM 11:00  
CLERK

JUN 10 1 2013  
CLERK

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CSR from Home LLC  
Name of Limited Liability Company

RECEIVED  
MAY 11 11 AM '11  
DIVISION OF CORPORATIONS

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Darin Calderoni  
Name of Person

CSR From Home LLC  
Firm/Company

8414 N Highland Ave  
Address

Tampa, FL 33604  
City/State and Zip Code

jaialai32@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Darin Calderoni at (813) 532-9797  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |                                                        |                                                                        |                                                                                                  |                                                                                                                            |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

**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**

CSR from Home LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
MAY 17 2019  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF  
DADE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 4-24-2019 and assigned  
Florida document number L1900011091.

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 "L.L.C."

**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*

\_\_\_\_\_, **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>  | <u>Type of Action</u>                      |
|--------------|-----------------|-----------------|--------------------------------------------|
| MGR          | Anna Dixon-Bird | 10829 Legume dr | <input type="checkbox"/> Add               |
|              |                 | Tampa, FL 33610 | <input checked="" type="checkbox"/> Remove |
|              |                 |                 | <input type="checkbox"/> Change            |
|              |                 |                 | <input type="checkbox"/> Add               |
|              |                 |                 | <input type="checkbox"/> Remove            |
|              |                 |                 | <input type="checkbox"/> Change            |
|              |                 |                 | <input type="checkbox"/> Add               |
|              |                 |                 | <input type="checkbox"/> Remove            |
|              |                 |                 | <input type="checkbox"/> Change            |
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|              |                 |                 | <input type="checkbox"/> Change            |
|              |                 |                 | <input type="checkbox"/> Add               |
|              |                 |                 | <input type="checkbox"/> Remove            |
|              |                 |                 | <input type="checkbox"/> Change            |

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated MAY 13, 2019.

Signature of a member or authorized representative of the organization

Signature of a member or authorized representative of a member

John Darin Calderoni

Typed or printed name of signee