L19000130161

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COVER LETTER

TO:

Registration Section
Division of Corporations

Noble Hom	e Watch LLC		
	Name of Lim	ited Liability Company	
Articles of	Amendment and fee(s) are sub	mitted for filing.	
all correspo	ndence concerning this matter	to the following:	
	Michael Hendricks		
		submitted for filing. Itter to the following: Name of Person C Firm/Company Address City/State and Zip Code com ss: (to be used for future annual report notification) se call:	
	Noble Home Watch LLC		Daytime Telephone Number See & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Address: Stration Section Sion of Corporations Centre of Tallahassee
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	270 Padova Way		
		Address	
	N. Venice, FL 34275		
		City/State and Zip Code	
	_		
	E-mail address; (to be used for future annual report not	ification)
nformation c	oncerning this matter, please ca	all:	
dricks			
Name of Person			ne Telephone Number
check for th	ne following amount:		
Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Address: Registration Section			ction
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			l allahassee ee Street, Suite 810
	all corresponds of corresponds of the corresponds o	Articles of Amendment and fee(s) are sub- all correspondence concerning this matter Michael Hendricks Noble Home Watch LLC 270 Padova Way N. Venice, FL 34275 info@noblehomewatch.com E-mail address: (afformation concerning this matter, please candricks Name of Person check for the following amount: filing Fee	Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: Michael Hendricks

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Noble Home Watch LLC					
(Name of the Limit	d Liability Compa A Florida Limited	iny as it now appears on our r Liability Company)	ecords.)	-	_
		111			
The Articles of Organization for this Limited Li	ability Company	were filed on May 151 201	9	and	assigned
Florida document number L19000130161					
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on May 2019 and assigned Florida document number L19000130161 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) North Venice, FL 34275 Solution of New Registered agent and/or registered office address on our records, enter the name of the new regist address here: Name of New Registered Agent:					
A. If amending name, enter the new name of	the limited liab	ility company here:			
''		_			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation	"LLC" or th	ne abbreviation	ı "L.L.C."
		, , ,			
Enter new principal offices address, if application	able:	270 P. J		21	
(Principal office address MUST BE A STREE	T ADDRESS)	<u></u>			
		North Venice, FL 34275		<u> </u>	: <u></u>
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Enter new mailing address, if applicable:					•
	270 P. J		-		
muning dudress MAT BE AT OST OFFICE I	<u> </u>	North Venice, FL 34275		. 	· · · · · · · · · · · · · · · · · · ·
		**			
R If amanding the registered agent and/or r	reistand office	addrass an aur racards a	ntor the r	ama af tha	now rogisto
	~	address on our records, e	iner me n	iame of the	new registe
					
Name of New Pagietoral Agent					
Name of New Registered Agent.					
New Registered Office Address:	270 Padova Wa	<u> </u>			
		Enter Florida street a	ddress		
	North Venice		_, Florida	34275	
		City		Zip Ce	ode

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 t 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 addor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
Manager	Tom Mattmuller	130 Inlets Blvd., Nokomis, FL 34275	
			□Remove
			□Change
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Typed or printed name of signee