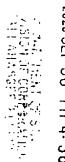
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	ecicus Hand Name of Lin	S Homemaker C nited Liability Company	Gord Companions Service
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Maurise	Name of Person	
	Precios He	Firm/Company	Companion Services LLC
	22.67 26-151	AV SO Address	
		City/State and Zip Code	
	neicyr4466 F-mail address: (OGNACY . COM to be used for future annual report not	ification)
For further information c	oncerning this matter, please c		
Maurise 1	Nuods	at (407) 374 - 8	si 30
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
以 \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 9 Division of C P.O. Box 632	Section Forporations	Street Address: Registration Se Division of Co The Centre of	rporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Precious Hands Harranakor-and Corrotation Services, LLC (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		ere filed on $\frac{7/15}{2}$	/14	and ass	igned
Florida document number <u>L/9000121933</u> This amendment is submitted to amend the following:				~	
A. If amending name, <u>enter the new name of the li</u>		y company here:	e •	2020 SEP 30	0.100mm
SAME AS	ABIVE	"	-	3	. market
The new name must be distinguishable and contain the words "L	imited Liability	Company," the designation	on "LLC" or the	abbreviation "L.1	COTT
Enter new principal offices address, if applicable:	-	2267 26th	Arlso		
(Principal office address MUST BE A STREET ADI	DRESS) _	2267 26th	og FL	<i>3</i> కౖ7/ఎ ఆ్డ	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	- - -	2261 2615 d. Petersk	AV SO	337/QL	
B. If amending the registered agent and/or register agent and/or the new registered office address here		lress on our records,	enter the na	me of the new	registere
		Moods			
New Registered Office Address:	<u>2-267 21</u>	Enter Florida stree	t address		
	-t. Dele	City J	Florida _	3371 D 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Beatice Fuller (Fuller, Beatine 6)	P.O Box 35211	□Add
	(Fuller, Beatrice G)	St. Petersburg FL 33705	DRemove
			□Change
MOR	Maurise Woods	2267 26te Av-150	læAdd
		\$, Defersburg FL 33712	<u>-</u> □Remove
			□Change
	-		□Add
			□Remove
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m effi	ve date, if other than the date of filing: 11-30-200 (optional) ective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
ote:	
ote: ocum	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ote: ocum recon is fil	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ote: ocum recon is fil	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the

Filing Fee: \$25.00