

L19000230491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

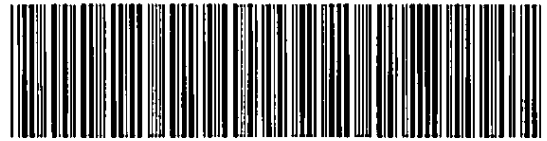
(Business Entity Name)

(Document Number)

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JUL 14 2020

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AUG 24 2020

S. YOUNG

2020 JUL 14 AM 7:23

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Florida Home Menders, LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Danny Grabowski

Name of Person

Florida Home Menders, LLC

Firm/Company

4504 W. Spruce St, #334

Address

Tampa, FL 33607

City/State and Zip Code

djgsk12@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danny Grabowski

813 309-7540  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 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 Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Florida Home Menders, 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 Company were filed on 3/19/2020 and assigned  
Florida document number L19000230491.

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)**

4504 W. Spruce St #334

Tampa, FL 33607

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

4504 W. Spruce St #334

Tampa, FL 33607

**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:**

Danny Grabowski

**New Registered Office Address:**

4504 W. Spruce St #334

*Enter Florida street address*

Tampa

Florida 33607

*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>
AMBR	Aaron Anderson	1123 Crimson Clover Lane	<input type="checkbox"/> Add
		Wesley Chapel, FL 33543	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Michael Rogak	14718 Tall Tree Dr	<input type="checkbox"/> Add
		Lutz, FL 33559	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Danny Grabowski	4504 W. Spruce St. #334	<input checked="" type="checkbox"/> Add
		Tampa, FL 33607	<input 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

If the record 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 record is filed.

2020

Michael Rogak

Typed or printed name of signee

**Filing Fee: \$25.00**