

L19000256925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

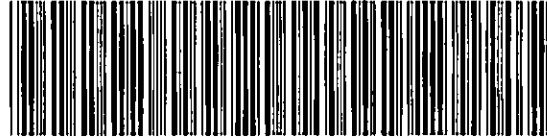
(Document Number)

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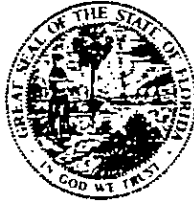
07/09/20--01013 -002 **55.00

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2020 SEP -8 PM 4:39

FILED

SEP 08 2020
S. YOUNG



2020 08 20 12:57

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 20, 2020

MARGARETTE JOASSAINT
MJ HOME HEALTH SERVICES LLC
6104 MIRAMAR PARKWAY
MIRAMAR, FL 33023

SUBJECT: MJ HOME HEALTH SERVICES LLC
Ref. Number: L19000256925

We have received your document for MJ HOME HEALTH SERVICES LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or manager of the limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 020A00015944

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BUSINESS NAME CHANGE

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:

MARGARETTE JOASSAINT

Name of Person

MJ HOME HEALTH SERVICES LLC

Firm/Company

6104 MIRAMAR PARKWAY

Address

MIRAMAR, FL 33023

City/State and Zip Code

mjoassaint@grjmultiservices.com

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

For further information concerning this matter, please call:

ROBERSON JOASSAINT

786

2594129

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**

MJ HOME HEALTH 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 Company were filed on 10/11/2019

Florida document number L19000256925

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MJ HOME CARE SERVICES LIMITED LIABILITY COMPANY

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)

6104 MIRAMAR PARKWAY

MIRAMAR, FL 33023

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


[illegible]

[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)

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

- The 90th day after the record is filed.



MARGARETTE JOASSAINT

Typed or printed name of signee