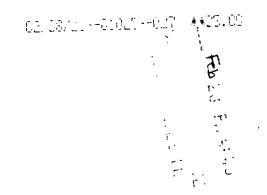
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO:

TO: Registration Se Division of Cor				
SUBJECT: FERN	ando Home Se Name of Lim	reviews 1/C		
SUBJECT	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Leonela	Makin Name of Person		
	Fernando Ho	ome Services. 1/1	1	
		Place Address		
•				(C)
	1 to al.	33/24 City/State and Zip Code C - COm to be used for future annual report notice	;	. <u> </u>
	E-mail address: (to be used for future annual report noti:	fication)	
	oncerning this matter, please c			
Leonela M	akin f Person	at () 86) <u>431-9</u> Area Code Daytim	063 e Telephone Number	
			•	
Enclosed is a check for the	ne following amount:			
★ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filin Certificate Certified Co (additional co	of Status &
Mailing Address		Street Address: Registration Sec	ction	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fernando Home.	Services LLC	
Feenando Home (Name of the Limited Liability (A Florida	y Company as it now appears on Climited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Co Florida document number <u>//9000</u> 25 <i>9</i> 8 89	ompany were filed on	1/5/2019 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
		F , 1
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our record	ds, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida st	reet address
	0:	, Florida Zip Code
	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>	Type of Action
VP	Jose Franando Villada	ZZNW 73rd place	□Add
		ZZNW 73rd place Mami Fl 33126	⊠ Remove
			□Change
			□Add
			□Remove
			□Change
			☐∧dd
			C1- ☐Ghange
			□Add
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			☐ Change
			□Add
			□Remove
			□Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□ Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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.

Dated Fed/24/2023

Dated Fed/24/2023

Leone/a Marin

Typed or printed name of signee

Filing Fee: \$25.00