

L19 000291900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

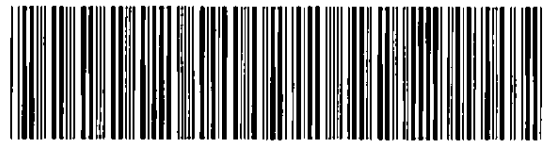
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



000434628370

08/14/24--01019--014 **60.00

8/19/24
KH

FILED
2024 AUG 14 PM 3:41
SEC. OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Home Landed 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:

Todd D Chrisp
Name of Person

Home Landed LLC
Firm/Company

1523 Luca Ave
Address

Fort Myers, FL 33916
City/State and Zip Code

Tdchrisp@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Todd D Chrisp at (239) 326 1473
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

2024 AUG 14 PM 3
RECEIVED
TALLAHASSEE
SECTION OF

FILED

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

Home Landed 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 1-1-2020 and assigned Florida document number L1900099190.

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)

9990 Coconut Road
Bonita Springs, FL
34135

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9990 Coconut Road
Bonita Springs, FL
34135

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:

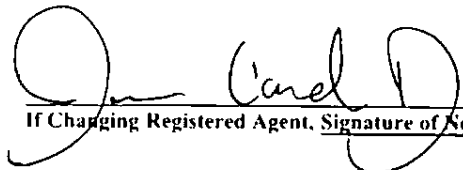
Jean Carol Davis

New Registered Office Address:

9990 Coconut Road
Enter Florida street address
Bonita Springs, Florida 34135
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

FILED
2020 JAN 10 PM 3:44
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF FLORIDA

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>
MGR	Todd D Chrisp	1523 Lura Ave	<input type="checkbox"/> Add
		Fort Myers, FL 33916	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jean Carol Davis	9990 Coconut Road	<input checked="" type="checkbox"/> Add
		Bonita Springs, FL	<input type="checkbox"/> Remove
		34135	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2023 AUG 18 PM 3:41
CLERK OF DISTRICT COURT
STATE OF FLORIDA
TALLAHASSEE, FL

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

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.

Th Q Ch

Todd D Christo

Typed or printed name of signee

FILED
2024 AUG 14 PM 3:41
CLERK OF DISTRICT COURT
TALLAHASSEE, FL

Filing Fee: \$25.00