

L200000 11245

(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

\$



100424615081

02/26/24--01018--015 **30.00

FILED

2024 FEB 26 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FL

Cover Letter

Current Business Name: Hearts In Unity, LLC

New Business Name: DVojce Care, LLC

Registered Agent(s): Shamille Thomas, Jamille Honor

Phone Number: 352-299-6847 (6846)

Address: 5 Pecan Drive Loop, Ocala, FL 34472

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hearts In Unity, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jamille Honor
Name of Person

Hearts In Unity, LLC
Entity Company

5 Pecan Drive Loop
Address

Ocala, FL 34472
City, State and Zip Code

Info@HeartsInUnity.com
E-mail address (to be used for future annual report notification)

FILED
2024 FEB 26 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call

Jamille Honor 352 299-6846
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

Hearts In Unity, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(All Florida Limited Liability Companies)

The Articles of Organization for this Limited Liability Company were filed on December 6, 2019 and assigned Florida document number L20000011245

This amendment is submitted to amend the following:

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

Dvaje Care, LLC

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:

N/A

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

N/A

(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:

(Not a Florida street address)

Florida

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>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change

FILED
2024 FEB 26 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FL

2024 FEB 26 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FL.

FILED
2024 FEB 26 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FL.

(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 605.0297 (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.

Dated February 21st 2024

Signature of a member or authorized representative of a member

Jamille Honor
Typed or printed name of signer