L20 000 178891

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	-
(Cit	y/State/Zip/Phone	e #)
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

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R. HUNT

COVER LETTER

TO: Registration Division of C				
	RIGHT LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	JENNYPHER ARISTILE	DE		
	-	Name of Person		
		Firm/Company 2		
	405 NW 7TH COURT A	Firm/Company PT. B Address Address City/State and Zip Code		
		Address		
	HALLANDALE FL	PHI		
City/State and Zip Code iamjennysmith2@gmail.com				
		to be used for future annual report notification)		
For further information	i concerning this matter, please c	all:		
JENNYPHER ARIST	TILDE	954 687-5580 at ()		
Name	e of Person	Area Code Daytime Telephone Number		
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	S30,00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & ☐ \$60,00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
Mailing Addr Registration Division of P.O. Box 6: Tallahassee	n Section Corporations 327	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

GUIDE RIGHT LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L20000178891	were filed on 06/25/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
REMOTE HOME BUSINESS LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable: 4302 HOLLYWOOD BLVDS		
(Principal office address MUST BE A STREET ADDRESS)	HOLLYWOOD, FL 33021	د-، دی
-		122
r-4	405 NW 7TH COURT APT. B	\$EP 12
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	HALLANDALE, FL 33009	
maning understand the strong of the body		PH 3 22 22 22 22 22 22 22 22 22 22 22 22 2
		07
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nan</u>	ie of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

Zio Code

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
MGR	JENNYPHER ARISTILDE	405 NW 7TH COURT HALLANDALE FL 33009	≣ Add
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E. Effective date, if other than the di (If an effective date is listed, the date must b <u>Note:</u> If the date inserted in this bloc document's effective date on the Depart	c does not meet the applicable statu	(optional) filing or more than 90 days after tiling.) Fitory filing requirements, this date w	Pursuant to 605,0207 (3) ill not be listed as the
f the record specifies a delayed of the record b). The 90th day after the record		ective time, at 12:01 a.m. or	n the earlier of:
Dated	2022		
of Anny			
Si	gnature of a member or authorized repr	resentative of a member	
JENNYPHER ARISTILD	E		

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Typed or printed name of signee

Filing Fee: \$25.00