

L20000287567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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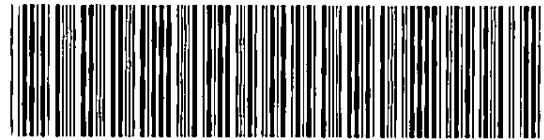
(Business Entity Name)

(Document Number)

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LLC Amend

11/13/24--01019--026 **25.00

FILED
2024 NOV 13 PM 12 30
CLERK OF SUPERIOR COURT
STATE OF MICHIGAN

A. RAMSEY
DEC. 12 2024

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Athena Home Care, 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:

Carlos Reyes Chouza

Name of Person

Athena Home Care, LLC

Firm/Company

17714 33rd Rd N

Address

Loxahatchee, FL 33470

City/State and Zip Code

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

For further information concerning this matter, please call:

Laritza Tome

561 814-1466

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**

FILED
2024 NOV 13 PM 12 31

ATHENA HOME CARE, 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 09/21/2020 and assigned
Florida document number 120000287567.

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 "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

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

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	Carlos Reyes Chouza	17714 33rd Rd N	<input checked="" type="checkbox"/> Add
		Loxahatchee, FL 33470	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Pedro L. Reyes Perez	4909 Royal Court S	<input checked="" type="checkbox"/> Add
		West Palm Beach FL 33415	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Geramy Garcia Hernandez	8249 SW 149 Ct	<input checked="" type="checkbox"/> Add
		Apt 206	<input type="checkbox"/> Remove
		Miami FL 33193	<input type="checkbox"/> Change
MGR	Ledian Cardoso	2591 W 60 Place	<input checked="" type="checkbox"/> Add
		Hialeah FL 33016	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Athena One LLC	5074 NW 74 Ave	<input type="checkbox"/> Add
		Miami FL 33166	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

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.

Dated November 11, 2024

Pedro Reyes Perez

Filing Fee: \$25.00