

L21000135654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

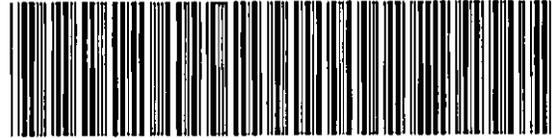
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700368014997

2021 JUN 21 AM 11:53

RECEIVED

21 AM 11:42

FILE

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 871383 8135689
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : June 18, 2021
ORDER TIME : 8:53 AM
ORDER NO. : 871383-005
CUSTOMER NO: 8135689

DOMESTIC AMENDMENT FILING

NAME: GROUP HOME HOLDINGS, LLC

EFFECTIVE DATE:

XXX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER'S INITIALS: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GROUP HOME HOLDINGS, 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:

Laurie McDaniel
Name of Person

Community Based Care, LLC
Firm/Company

6531 Meridien Drive Suite 103
Address

Raleigh, NC 27616
City/State and Zip Code

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

For further information concerning this matter, please call:

Laurie McDaniel at (828) 499-0218
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**

GROUP HOME HOLDINGS, 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 4/01/2021 and assigned Florida document number L21000135654.

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>
<u>MGR</u>	<u>Tina Engleman</u>	<u>6531 Meridien Drive Suite 103 Raleigh, NC 27616</u>	<input checked="" type="checkbox"/> Add
		<u>_____</u>	<input type="checkbox"/> Remove
		<u>_____</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Rob Patterson</u>	<u>6531 Meridien Drive Suite 103 Raleigh, NC 27616</u>	<input checked="" type="checkbox"/> Add
		<u>_____</u>	<input type="checkbox"/> Remove
		<u>_____</u>	<input type="checkbox"/> Change
<u>MGR</u>	<u>Debbie Talbott</u>	<u>6531 Meridien Drive Suite 103 Raleigh, NC 27616</u>	<input checked="" type="checkbox"/> Add
		<u>_____</u>	<input type="checkbox"/> Remove
		<u>_____</u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>Mike Kotzen</u>	<u>6531 Meridien Drive Suite 103 Raleigh, NC 27616</u>	<input checked="" type="checkbox"/> Add
		<u>_____</u>	<input type="checkbox"/> Remove
		<u>_____</u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>Laurie McDaniel</u>	<u>6531 Meridien Drive Suite 103 Raleigh, NC 27616</u>	<input checked="" type="checkbox"/> Add
		<u>_____</u>	<input type="checkbox"/> Remove
		<u>_____</u>	<input type="checkbox"/> Change
<u>_____</u>	<u>_____</u>	<u>_____</u>	<input type="checkbox"/> Add
		<u>_____</u>	<input type="checkbox"/> Remove
		<u>_____</u>	<input type="checkbox"/> Change

