

121 000 147 424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

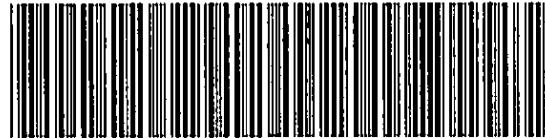
(Business Entity Name)

(Document Number)

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A. BUTLER

JAN 13 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Heart of Love and Compassion Home Care Services 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:

Megan Richards  
Name of Person

Heart of Love and Compassion LLC  
Firm/Company

2330 Simonson Drive  
Address

Wellington FL 33414  
City/State and Zip Code

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

For further information concerning this matter, please call:

Megan Richards at ( 954 ) 793 - 9596  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Heart of Love and Compassion Home care services  
(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 March 30, 2021 and assigned FILE  
Florida document number L21000147424

This amendment is submitted to amend the following:

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

HEART OF LOVE And Compassion Home care services LLC  
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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**

[illegible]

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I am currently amending my company name from HEART OF LOVE And Compassion Limited Liability Company LLC to HEART OF LOVE And Compassion LLC.

I would like to abbreviated Limited Liability Company to LLC on my company name.

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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)

**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.

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 12 / 27, 2021.

M Richards

Signature of a member or authorized representative of a member

Megan Richards

Typed or printed name of signer



RONDESANTIS  
GOVERNOR

SIMONE MARSTILLER  
SECRETARY

December 16, 2021

Emailed to: [meganrchrds@yahoo.com](mailto:meganrchrds@yahoo.com)

Megan Richards, Administrator  
Heart Of Love and Compassion Home Care Services  
LLC  
2330 Simonson Dr  
Wellington, FL 33414

File Number: 39973793

License Number:

Provider Type: Homemaker and Companion  
Services

**Re: Omission Notice for Heart of Love and Compassion Home Care Services LLC, 2330 Simonson Dr, Wellington, FL 33414.**

Dear Administrator:

This letter is to acknowledge receipt of your Initial application for your Homemaker and Companion Services license. After review, it was found to be incomplete. Applicants receive only **one** letter describing the errors or omissions that must be addressed to deem the application complete. If the response to this letter does not satisfactorily address what is outlined below, the application will be withdrawn from consideration. Therefore, pursuant to section 408.806, Florida Statutes, no further action can be taken until the following is received:

1. In Section 4 of the addendum, the name of the financial officer is missing. The financial officer and the administrator may be the same person. Please enter "same as administrator" or fill in the blanks.
2. Pursuant to Chapter 435.12, (2)(c), Florida Statutes, "An employer of persons subject to screening by a specified agency must register with the clearinghouse and maintain the employment status of all employees within the clearinghouse. Initial employment status and any changes in status must be reported within 10 business days."

Presently, HEART OF LOVE AND COMPASSION HOME CARE SERVICES LLC has no employees registered on its Clearinghouse employee roster. You must register all employees that have been screened in the Clearinghouse. Please visit the Background Screening Unit's website at: <http://ahca.myflorida.com/backgroundscreening> or call 850-412-4503 to obtain additional information.

3. FYI- The corporation is registered in The Division of Corporations as HEART OF LOVE AND COMPASSION HOME CARE SERVICES LIMITED LIABILITY COMPANY LLC. Please update name with the Divisions of Corporations so that it matches what is on the application. (LLC is written out in division of corporations but abbreviated on the application.

Attention  
for  
name  
change

