L22000158230

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(City/State/Zip/Phone #)
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(Document Number)
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2023 AUG 17 AM 9: 23
SECRETARY OF STATE

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COVER LETTER

TO:	Registration Sec Division of Corp		••	
SUBJ	іест: <u>ТУ</u> F	amily Home Name of Limi	Services, CC ited Liability Company	<u> </u>
The e	nclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	e return all correspor	idence concerning this matter	to the following:	
		VamileHe	Cortzialez Name of Person	·····
			Firm/Company	
		145 Grou	e Branch Rol	
		Winter to	Joseph Fl. 338 City/State and Zip Code 39@amail.com	<u> 20</u>
For fu	orther information co	ncerning this matter, please ca	to be used for thiture annual report notif all:	ication)
	amilette Name of	Gonzalez	at (<u>&G.)</u> <u>289</u> -	-5603 e Telephone Number
Enclo	sed is a check for the	r following amount:		
7/2	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

	, 15-ED				
	caning Servings, LC				
(Name of the Limited Liability Compar (A Florida Limited I.	101-111 C				
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000158230</u>	were filed on 5 19 VED BESSEE and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	lity company here:				
JY Family Home Service	SLC				
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:	145 Grove Branch Rd				
(Principal office address MUST BE A STREET ADDRESS)	Winter Haven Fl. 33880				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	same				
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 Agent				
New Registered Office Address:	(Same Agent) Enser Florida street address				
Winte	Haven Florida 33880 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>	Address	Type of Action
MGR	Yamilette ConzAlez	145 Grove Branch Rd	Add
		145 Grove Branch Rd Winter Haven F1,33	882 Remove
			□Change
			🗆 Add
			□Remove
			□Change
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, ii aiii	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef Note:	ive date, if other than the date of filing: Aug. 16, 2073 (optional) fective 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the recordis fi	d 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 led.
Dated	Hyg. 15,
	Typed or printed name of signee