

122 0002 00090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

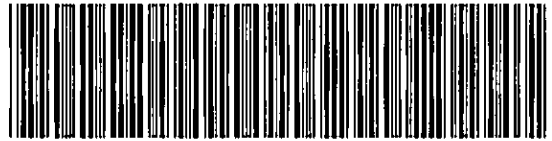
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/27/22--01029--001 **25.00

FILED
2022 JUN 27 AM 8:33
TALLAHASSEE, FL

TO: Registration Section
Division of Corporations

SUBJECT: Fleming Home 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:

Russell Lee Myers
Name of Person

Fleming Home Services
Firm/Company

302 Hollywood Forest Drive
Address

Fleming Island, Florida 32003
City/State and Zip Code

lee.myers906@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Russell L. Myers at (904) 219-4355
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

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2077 JUN 27 AM 8:33

(Name of the Limited Liability Company as it now appears on our records.
(A Florida Limited Liability Company)

04/27/22

72 TALIB ASSOCIATES
and associates

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

(Principal office address MUST BE A STREET ADDRESS)

(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

, Florida

Civ

Zip Code

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

MGR = Manager
AMBR = Authorized Member

[illegible]

2007 JUN 27 AM 8:33
SULLIVANS

FILED
2007 JUN 27 AM 8:33
FBI - LAS VEGAS

(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)

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 June 24th, 2022

Russell F. Meyer
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Russell Lee Myers
Typed or printed name of signee

Typed or printed name of signee