

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**L22000431058**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : AMERICA TAX & ACCOUNTING CORP  
Account Number : I20200000107  
Phone : (305)900-9225  
Fax Number : (786)541-8425

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ELLA HOUSEKEEPING LLC**

Certificate of Status	0
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Estimated Charge	\$25.00

2023 AUG 14 AM 10:34

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F. LEMIEUX

AUG 15 2023

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELLA HOUSEKEEPING 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 10/05/2022 and assigned  
Florida document number 1.22000431058.

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)

1061 SW 31ST

FORT LAUDERDALE, FL 33315

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1061 SW 31 ST

FORT LAUDERDALE, FL 33315

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:

N/A

New Registered Office Address:

1061 SW 31ST

Enter Florida street address

FORT LAUDERDALE

Florida

33315

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]

[illegible]

Typed or printed name of signee