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SECTION 28 AT IN STAT

Detail by Entity Name

Fordall Imited Liability Company LENNIER HEINHOME SERVICES LLC

Filing Information

Document Number

FEI/EIN Number

Date Filed

State Week

Status测量

Principal Address

12460 GLENN HOLLOW DR JACKSONVILLE FL 32226

Mailing Address

12460 GLENN HOLLOW DE JACKSONVILLE FLE32226

Registered Agent Name & Address

HEINBJENNIEER 12460 GLENN HOLLOW DR

JACKSONVILLE FL 32226

Authorized Person(s) Deta

NONE

Annual Reports

No Annual Reports Filed

HELLO, I THINK I MADE A MISTAKE WHILE APPLYING. THE BANK SAID THIS "AUTHORIZED PERSON" NEXDS TO HAVE MY INFO. THAMK YOU

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1/04/2022

Document Images

11/04/2022 - Florida Limited Liability

Niew image in PDF format

COVER LETTER

TO: Registration Se Division of Cor		·	•	
SUBJECT: Jeng	nifer Hein Ho Name of Lim	ine Services ited Liability Company	L L C	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	endence concerning this matter	to the following:		
	Jennife	R Hein Name of Person		
	<u>Jennifer</u>	Hein Home Serv Firm/Company	rice SLLC	
	12460 Gler	n Hollow DR Address		
	Jacksopull	City/State and Zip Code		
	Jenniferte E-mail address:	to be used for future annual report notified	J.e + (fication)	
For further information c	oncerning this matter, please ca	all:		
Jenni Ler Name o	Hein Person	at (<u>ADL</u>) <u>3.21</u> - Area Code Daytime	1990 SECRET	
Enclosed is a check for the	ne following amount:		V 28 I'ARY AHAS	
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copyris (additional copy is enclosed)	
Mailing Addres Registration S Division of C	Section Corporations	Street Address: Registration Sec Division of Cor	porations	
P.O. Box 632		The Centre of T	ananassec	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited I	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 22 00 c 474 185</u> .	were filed on Nevember 4, 702 Zand assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	12460 Colenn Hollow DR
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, Ft. 32026
Enter new mailing address, if applicable:	12460 Glenn Hollow DR
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL 32226
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	-
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address

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.

Cuv

If Changing Registered Agent, Signature of New Registered Agent

Florida_

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
AMBR	Jennifer Hein	12400 Clenn Hollow DR	•
		Jacksonville, Fl 32226	□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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cord specifies a delay is filed.	yed effective date, but n	ot an effective tir	me, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
od VOVIMB	ER 23	. 2022	<u>.</u> .		
ica <u>// / / / / / / / / / / / / / / / / / </u>)	///			
ted	Signature of	a member or autho	rized representative of	'a member	

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