L >30000 86601

(Requestor's Name)	
(Address)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



300403559733

05/12/23 -01016--026 **30.00



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SWEET BEE HOME SERVICES LI	.C		
(Name of the Limited	Liability Compa Florida Limited I	ny as it now appears on our records lability Company)	_)
The Articles of Organization for this Limited Liab Florida document number L23000086601	oility Company	were filed on <u>02/17/2023</u>	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liab	ility company here:	20
SWEET BEE HOME WATCH SERVICES LLC			23
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation L.L.C.
Enter new principal offices address, if applical	nter new principal offices address, if applicable:		7
Principal office address MUST BE A STREET ADDRESS)		Naples, FL 34108	SSSS A D
			30
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		79 Ridge Drive	
		Naples, FL 34108	
B. If amending the registered agent and/o registered agent and/or the new registered offi	r registered o ice address her	ffice address on our records <u>re</u> :	s, enter the name of the no
Name of New Registered Agent:	Todd B. Allen		
New Registered Office Address:	13180 Livings	ton Rd., Ste #206	
Hen hegistered office (tamens	<u></u>	Enter Florida street addres	
	Naples	. Flo	orida 34109

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.

City

Todd B. Allen

Zip Code

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
AMBR	Demonica A. Ison		DAdd
			☐ Remove
		79 Ridge Drive Naples, FL 34108	■ Change
AMBR	Cynthia Bissette	79 Ridge Drive Naples, FL 34108	■ Add
			☐ Remove
			Change
AMBR	Mark Bissette	79 Ridge Drive Naples, FL 34108	= Add
			☐ Remove
		23 HA T	
			Remove
			SSEC FL
			□ Remove
			☐ Change
			Add
			Remove
			□ Change

		-	
		<u> </u>	
		<u> 207</u>	
		3 MA	
		12 AH.	
		SSEE SSEE	
		F. 30	-
		1 1	_
			_
			_
			_
(If an e	(optime date, if other than the date of filing:	ional) r filing.) Pursuant to 60 is date will not be list	5.0207 (3 ted as the
the r	cord specifies a delayed effective date, but not an effective time, at 12:01 good part of the record is filed.	a.m. on the earli	ier of:
Date	April 24 . 2023. Demoniu A. Mon		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00