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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

Fax Number

: (307)200-2803 : (855)330-1010

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

Email Address:	
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **HOMEWARE & MORE LLC**

Certificate of Status	0
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S. ROBERTS

JUN - 8 2...

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Homeware & More 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  $\frac{05/02/23}{}$ \_\_\_\_ and assigned Florida document number \_\_\_\_\_\_ 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 "LLC." 10700 Beach Blvd Unit 17651 Enter new principal offices address, if applicable: Jacksonville, FL 32246 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 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.

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	Nicholas Brooks	7901 4th St N STE 300	X Add
		St. Petersburg, FL 33702	□Remove
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Effective date, if other than the fan effective date is listed, the date is Note: If the date inserted in this document's effective date on the	block does not meet the applic	able statutory filing requirement	<b>(optional)</b> Hays after filing.) Pursuant to 605,0207 (2) Hays after filing.) Pursuant to 605,0207 (2) Hays after will not be listed as the
e record specifies a delayed effect d is filed.	tive date, but not an effective ti	me, at 12:01 a.m. on the earlie	r of: (b) The 90th day after the
Dated June 7th	. 2023	<u> </u>	
	Smith		
<del>-i</del>	Signature of a member or author	orized representative of a member	<del></del>
Nat Smith			
	Typed or print	ed name of signee	

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