L23000311959

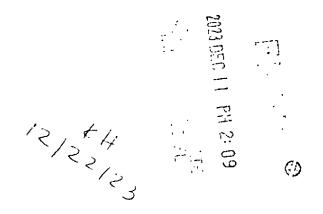
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COVER LETTER

Div	ision of Corp	orations			
SUBJECT:	Gentle Heart	s Nanny Service, LLC			
SUBJECT.					
The enclosed	d Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	idence concerning this matter	to the following:		
		Tara Jordy			
			Name of Person	-	
		Gentle Hearts Nanny Servi	ce, LLC		
			Firm/Company		
		8101 Bardmoor Place #103	ВН		
		-	Address		
		Seminole, FL 33777			
			City/State and Zip Code	- · ·	
		Tara.Jordy@OurGentleHead			
		E-mail address: (to be used for future annual report notification	1)	
For further is	nformation co	ncerning this matter, please co	all:		
Tara Jordy			727 213-8958	207	
	Name of	Person	at ()Daytime Telep	ohone Number	
Enclosed is a	a check for the	following amount:		7 560 00 Elling Fag	
□ \$ 25.00 £	iling Fee	X \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &	•
			(additional copy is enclosed)	Certified Copy (additional copy is enclosed)	0

Malling Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Registration Section

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gentle Hearts Nanny Service, LLC

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

0.410.010.000

The Articles of Organization for this Limited Lia Florida document number L23000311959	bility Company	were filed on ^{06/29/2023} and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, gater the new pame of	th <u>e limited liab</u>	Lity company kere:
The new name must be distinguishable and contain the wo	ords "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica (Principal office address MUST BE A STREE)		\$101 Cordmon Pour *103 H Servingle, Fiz 33777
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8101 Bardmoor Place *103H Seminale FL 33777
3. If amending the registered agent and/or reagent and/or the new registered office address	••	address on our records, enter the name of the new registered?
Name of New Registered Agent:	Tara Jordy	
New Registered Office Address:	8101 Bardmoos	
	5 · I	Enter Florida street address
	Seminole -	Florida 33777 Zip Code
New Registered Agent's Signature, if changing R	egistered 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, Signatule of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the tite, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Mame :	Address	Type of Action
AMBR	Kelly L. Pickering	1332 Pasadena Avenue South #106	∏Add
		South Pasadena, FL 33707	iXemove
			□Change
			□Add
			□Remove
			TChange
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		10231	5 N. 1
		DEC	1
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• •			3
3. Effective date, if other than the date of filing:	(optional)	ر المراكب المر المراكب المراكب المراك	2.09 ()
(If an effective date is listed, the date must be specific and cannot be prior to date of f	iling or more than 90 days after filing)	Pursuant to 605 0207 (31th)	6 O

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

Signature of member or authorized representative of a member

2023

record is filed.

Dated December 7