## L23000335676

(Rec	questor's Name)	
(Add	liess)	
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(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	





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## **COVER LETTER**

TO: Registration Se Division of Con			. •	
Vision Hor	me Services, LLC			
SUBJECT:	Name of Limi	ited Liability Company		_
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Scott K Washington			
		Name of Person		
	Vision Home Services, LLO	С		
		Firm/Company		_
	3290 Carlotta Rd			023 S SECR
		Address		ETAL LAI
	Middleburg, FL 32068			15.55 19.55 19.65 19.65
		City/State and Zip Code	****	2023 SEP 26 AM II: 39 SECRETARY OF STATE TALLAIDASSEF.FL
	E-mail address: (t	o be used for future annual r	eport notification)	- Fig. 39
For further information c	oncerning this matter, please ca	ill:		
Scott K Washington		904 554-	-6487	
Name o	f Person	Area Code	Daytime Telephone Num	ber
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certifi osed) Certifi	Filing Fee, icate of Status & ied Copy in al copy is enclosed)

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

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

Vision Home Services, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our reco. Liability Company)	rds.)
The Articles of Organization for this Limited Liability Company	were filed on 7/17/2023	and assigned
Torida document number 1.23000335676		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LI	.C" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		2023 SEC
		P - 5
nter new mailing address, if applicable:		5 6 1 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Mailing address MAY BE A POST OFFICE BOX)		
	-	
		, <u>ii</u> , 6
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		7-64
	Enter Florida street addre	ess
		lorida
	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 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
MGR	Robert A Gower	3533 Sheldon Rd.	
		Orange Park, FL 32073	□Remove
			□Change
			□Add
			□Remove
		<del>-</del>	(I) Change
			2026 SEP
			Change
			72 3 9□Add
			□Remove
			Change
	<del>-</del>	<u> </u>	□Add
			□Remove
			□Change
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		<u> </u>	□Remove
			□Change

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				. To	=	C. T.
					39	
				_		
Tective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prio  ote: If the date inserted in this block does not meet the appli- cument's effective date on the Department of State's records	icable statute	ing or more than 9 ory filing require	(option days after fil ments, this d	ing.) Pur	suant to not be	605.020 listed a
record specifies a delayed effective date, but not an effective t is filed.	time, at 12:0	1 a.m. on the ea	lier of: (b)	The 90	th day a	ifter the
September 21 2023						
September 21 2023  Signature of a njember or auth						

Filing Fee: \$25.00