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200437466332

PALLAHASSEE FLORIDA

COVER LETTER

. TO: Registration Section Division of Corporations
SUBJECT: La Cosecha Home Services LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Santo Reges Reyes La CoSecha Home Services Firm/Company
7528 NW 2nd Court
City/State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SonTo Reyes Be yes at (786) 973 2907 Name of Person at (786) Daytime Telephone Number
Enclosed is a check for the following amount:
Mailing Address: Street Address:

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

La Cosecha (Name of the Limited Lia)	on in 9	Services	LLC ds.)	
	ida Limited Liability (• • •		
The Articles of Organization for this Limited Liability	Company were fi	led on <u>03</u> -08-	<u>24</u>	and assigned
Florida document number \(\L24000 \) 1943	Z_ .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liability cor	mpany here:		
La Cosecha Home The new name must be distinguishable and contain the words "L			" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:		, , , , , , , , , , , , , , , , , , , ,		
(Principal office address MUST BE A STREET ADI	DRESS)		TĂĮ.	202
			LA NAS	
Enter new mailing address, if applicable:			<u> </u>	ω !
(Mailing address MAY BE A POST OFFICE BOX)			<u>г</u> і	3 € € € € € € € € € € € € € € € € € € €
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B. If amending the registered agent and/or register		on our records, <u>enter</u>	the name of	the new registered
agent and/or the new registered office address here				
N. CM. D. V. LA				
Name of New Registered Agent:				
New Registered Office Address:		<u> </u>		
		Enter Florida street addre:	V.S	
	271.		lorida	
	City	:	Zı	ip Code

New Registered Agent's Signature, if changing Registered Agent:

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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

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
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			□Remove
		 	□ Change
			□Remove
			Change
			□Add
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e record specifies rd is filed.	a delayed effective	date, but not a	ın effective ti	me, at 12:01 a.	m, on the earlie	er of: (b)	The 90tl	i day afi	ter the
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