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(Requestor's Name)					
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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations			
	Heartland E	Iurricane Cleaning, LLC			
SUBJECT:					
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Robert S. Swaine			
			Name of Person		
		Swaine, Harris &Wohl, P.,	Α.		
			Firm/Company		
		425 South Commerce Ave	nue		.2
			Address		024.
		Sebring, Florida 33870			
			City/State and Zip Code	.,,	
		service@heartlandlaw.com	to be used for future annual report no	ai figuism)	
For further in	nformation c	oncerning this matter, please c		arrication)	2024 JUN 28 AN 19: 17
Robert S. Sv	vaine		863 385-1549		
	Name o	f Person	Area Code Daytii	me Telephone Number	
Enclosed is a	check for th	ne following amount:			
≘ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
	iling Addres		Street Address: Registration S	ection	
Registration Section Division of Corporations			Division of Co		
P.C). Box 632	7	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Heartland Hurricane Cleaning, 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 June 12, 2024 and assigned Florida document number $\frac{1.24000263014}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Heartland Hurricane Services, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 4608 Whiting Drive Enter new principal offices address, if applicable: Sebring, Florida 33870 (Principal office address MUST BE A STREET ADDRESS) 4608 Whiting Drive Enter new mailing address, if applicable: Sebring, Florida 33870 (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 , Florida

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

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change 024
			28 7 Remove 77
			☐ ☐ Remove ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			□Add
			□Remove
			□Change
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			□Remove
			□Change
			□Add
			Remove
			□ Change

If amending any other information, enter change(s) he	
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	(optional) or to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 icable statutory filing requirements, this date will not be listed as the list.
ne record specifies a delayed effective date, but not an effective ord is filed.	time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated June 24 2024	1-12-
Signature of a member or as	thorized representative of a member
	morned representative or a memor
LaVaar Scott	nted name of signee

Filing Fee: \$25.00