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COVER LETTER

CO: Registration Section Division of Corporations
GIBSON Home Services OF SWFL LLC
Name of Limited Liability Company
'he enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jessica E. Gibson Name of Person
Gibson Home Services Of SWFL LLC Firm/Company
13461 Caribbean Blvd.
Fort Myers, FL 33905 City/State and Zip Code GIBSONE JESSICA DAOL. COM E-mail address (to be used for future annual report notification)
E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
T = -11.
Name of Person at (339) 745 - 0002 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{S25.00 Filing Fee & Certificate of Status}\$\$ \text{Certificate of Status}\$\$ \text{Certified Copy (additional copy is enclosed)}\$\$ \text{Certified Copy (additional copy is enclosed)}\$\$ \text{Certified Copy (additional copy is enclosed)}\$\$
Mailing Address: Registration Section Street Address: Registration Section
Division of Corporations Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gibson Home S	pervice	s of SW	FL LLC	_		
(Name of the Limited	Liability Compa Florida Limited	S O+ SW Liability Company)	n our records.)			
The Articles of Organization for this Limited Liab Florida document number <u>L 34000 3</u> は6 と	ility Company	were filed on	une 11, 2) <u>) </u>	ıd assig	gned
This amendment is submitted to amend the follow	ring:					
A. If amending name, enter the new name of the N/A						
The new name must be distinguishable and contain the word	ls "Limited Liabi	lity Company," the desi	gnation "LLC" or the	abbreviati	on "L.L	.C. "
Enter new principal offices address, if applicab	le:	N/A				
(Principal office address MUST BE A STREET.	ADDRESS)					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)x)</u>	A/N		12 i	24 JUN 1	77;
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our reco	ords, <u>enter the na</u>	me of th	3 H Sew	registered
Name of New Registered Agent:	NA					
New Registered Office Address:		Enter Florida	street address			
		· · · · · · · · · · · · · · · · · · ·	, F lori da _			
		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 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
AMBR	Jessica E. Gibson	13461 Caribbean Blvd. Fort Myers, FL 33905	XAdd
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			☐ Change
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	on the Department of Sta	ite's records.			
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