## L14000133287

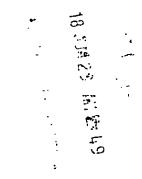
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PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:
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Office Use Only



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## **COVER LETTER**

TO:	Registration Sec Division of Corp					
eunu		LAND SERVICES LLC				
SUBJE	.CT:		ited Liability Company			
The end	closed Articles of a	Amendment and fee(s) are sub-	mitted for filing.			
Please	return all correspor	ndence concerning this matter	to the following:			
		Processing Department				
			Name of Person	· <del></del>		
		MyCorporation				
		<del></del>	Firm/Company			
		26025 Mureau Road, Suite 120				
		Address				
		Calabasas, CA 91302				
			City/State and Zip Code			
		E-mail address: (t	to be used for future annual report notific	cation)		
For fur	ther information co	oncerning this matter, please ca	all:			
МуСог	poration		at () 224-7639 Area Code Daytime			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclose	ed is a check for th	e following amount:				
\$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ny as it now appears on our records.) Liability Company)	-
were filed on 08/25/2014	and assigned
ility company here:	
lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
5055 SW. 00	Kwood ave
Hrcadia FL, 30	(1)69
Same	<del></del>
	; 22 .
	<u> </u>
ffice address on our records, <u>e</u> :	enter the name of the ne
	- يو
Enter Florida street address	
, Flor	ida Zip Code
	ility company here:  ity Company," the designation "LLC" of 5055 S.W. of Arcadia FL, 30  Same  Same  Enter Florida street address, Florida street addr

## 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 =	<b>Authorized</b>	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
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			Change
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		<del></del>	
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			Remove
			Change
			Add
			□ Remove
			Change

D.	If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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<b>E.</b>	Note:	ve date, if other than the date of filing:
		ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
	Dated .	6-21, 7018
		Signature of a member or authorized representative of a member
		Andrew Stevens, AMBR
		Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00