L18000159638

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MAY 13 2019 I ALBRITTON

COVER LETTER

Go Eco Exterior Home Services, LLC SUBJECT: 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: Jesse Kammerer Name of Person Go Eco Exterior Home Services, LLC Firm/Company 7045 Crock Ave. Address North Port, Florida 34291 City/State and Zip Code kammererbd@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jesse Kammerer 5391524 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee, ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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



May 4, 2019

JESSE KAMMERER 7045 CROCK AVE NORTH PORT, FL 34291

SUBJECT: GO ECO EXTERIOR HOME SERVICES LLC

Ref. Number: L18000159638

We have received your document for GO ECO EXTERIOR HOME SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L17000078718 - ISLAND PRO PRESSURE WASHING, LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 219A00009003

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Go Eco Exterior Home Services, LLC						
(<u>Name of the Limited Liab</u> i (A Flori	<mark>ility Company as it now appears on our records.</mark> da Limited Liability Company)	<u> </u>				
The Articles of Organization for this Limited Liability Florida document number $\frac{L18000159638}{L18000159638}$	Company were filed on 06/29/2018	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lin	nited liability company here:					
Island Pro Painting and Pressure Washing, LLC						
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADD	DRESS)	20.19				
		ا با در است. مست				
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>				
Thuning duaress MAT DE AT OST OF FICE BOM						
						
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad Name of New Registered Agent:		enter the name of the new				
Name of New Registered Figure.						
New Registered Office Address:	Entir Florida etrout addrace					
	Enter Florida street address					
	, Flor	rida				
Nam Baristanad Agant's Simptons if shapping Basistan	·	ng con				
New Registered Agent's Signature, if changing Register						
I hereby accept the appointment as registered agen- provisions of all statutes relative to the proper and accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my duties, and agent as provided for in Chapter 605, F red office address, I hereby confirm that	l I am familiar with and .S. Or, if this document is				

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
			Add
			□ Remove
			Change
			
			Remove
			☐ Change
			□ Add
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Effective date.	if other than th	e date of filing	•		la	optional)	
(If an effective date <u>Note:</u> If the dat	is listed, the date mu e inserted in this b ctive date on the I	ist be specific and lock does not m	cannot be prior t eet the applica	o date of filing or r	nore than 90 days	after filing.) Pursua	
	ecifies a delaye ay after the re		ate, but not	an effective	time, at 12:(01 a.m. on the	e earlier of
Dated May 9th			2019				
	1928 O	h0 200		rized representative			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00