L1500121656

(Red	questor's Name)	
(Ado	dress)	
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(City	y/State/Zip/Phone	e #)
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A + SUGAR BEAR PEST CONTROL LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny a <u>s it now appears on our records.</u>) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L 15000121656	were filed on SECRETARY OF STATE and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
SUGAR BEAR, LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	23303 McCANDLESS AVE.
(Principal office address MUST BE A STREET ADDRESS)	PUNTA GORDA FL. 33980
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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

COVER LETTER

Division of Cor			
SUGAR BE	•		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	SANFORD ALEXANDER	SUGAR	
		Name of Person	
	SUGAR BEAR , LLC		
		Firm/Company	
	23303 McCANDLESS AV	E.	
		Address	
	PUNTA GORDA FL. 3398	30	
		City/State and Zip Code	
	sanforysougar@yahoo.com		
		to be used for future annual report notific	cation)
For further information c	oncerning this matter, please ca	all:	
SANFORD ALEXAND	ER SUGAR	941 421-6348 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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

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
OWNER	SANFORD ALEXANDER SUGAI	23303 McCANDLESS AVE.FL.33	Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			Change
	,		
			Change C
			Change
			Remove
			☐ Change
			Add
			□ Remove
			Change
			□ Add
			☐ Remove
			Change

"A + SUGAR BEAR PEST CON	TROL LLC" TO THE PREVIOUS NAME	_
"SUGAR BEAR, LLC" UNDE	ER WHICH MY COMPANY	
· WAS REGISTERED BEFORE BY	Y THE SECRETARY OF THE STATE OF FLORIDA	
IN THE PUBLIC RECORDS.		_
THE REASON FOR THIS CHAN	NGE IS EXPLAINED BELOW.	
MY PEST CONTROL LISENCE	IS REGISTERED IN THE PUBLIC RECORDS AT TH	HE DEPARTMENT
OF AGRICULTURE UNDER #	JB 158995 AND MY CERTIFIED PEST CONTROL O	PERATOR
# JF 157123 UNDER THE NAM	IE OF SANFORD ALEXANDER SUGAR. THE SAME	REFERS TO MY ID.
IF I USE THE NEW NAME "A +	· SUGAR BEAR PEST CONTROL LLC", AS IT IS A	LREADY IN THE
PUBLIC RECORDS, IT WILL N	OT CORRESPOND TO THE LICENSE REGISTERED	BY THE
DEPARTMENT OF CONSUMER	R SERVICE BUREAU OF ENTOMOLOGY AND PES	ST CONTROLL 5
IN TALLAHASSEE. IN CASE I	USE THE NEW NAME "A+ SUGAR BEAR PEST C	ONTROL LLC.
	L APRIL AND JUNE 2016 - THE RENEWAL DATE (*.1.2
THEREFORE, I CANNOT USE	THE NAME "A+ SUGAR BEAR PEST CONTROL LL	
NOT MATCH MY PRESENT PE	EST CONTROL LICENSE,	AND AND
te: If the date inserted in this block of the date on the Depart	specific and cannot be prior to date of filing or more than 90 days does not meet the applicable statutory filing requirements tment of State's records. Fective date, but not an effective time, at 12:	s, this date will not be listed
ted	- For	

Page 3 of 3

Filing Fee: \$25.00