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(Requ	estor's Name)	
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C. GOLDEN FEB 2 8 2019

COVER LETTER

Division of Corp	oorations		
jonathan m	organs select ground main	tenance, lic	
3000E1.	Name of Lim	nited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	jonathan morgan		
٠	select ground maintenance	Name of Person	
	5210 compass court	Firm/Company	
	pace, FL 32571	Address	
	selectgroundmaintenance@	City/State and Zip Code	
	City/State and Zip Code selectgroundmaintenance@gmail.com E-mail address: (to be used for future annual report notification)		
For further information co	ncerning this matter, please ca	all:	
jonathan morgan		850 572-8535	
Name of	Person		e Telephone Number
Enclosed is a check for the	following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

Registration Section

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

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED

jonathan morgans select ground maintenance, llc

2019 FEB 25 PM 5: 13

The Articles of Organization for this Limited Liability Company were filed on ______ and assigned Florida document number L18000237155 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Select Ground Maintenance, LLC The new name must be distinguishable and contain the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (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 __ City 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:

<u>or rémovea</u>	troni our records.		
MGR = M $ AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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Effective date, if other that (If an effective date is listed, the dangle in If the date inserted in document's effective date on	his block does not meet th	e applicable statut	iling or more than 90 da ory filing requiremen	(optional) ys after filing.) Pursuant to ts, this date will not be	o 605.0207 (3)(e listed as the
the record specifies a de) The 90th day after the	layed effective date, e record is filed.	but not an effe	ective time, at 12	2:01 a.m. on the e	arlier of:
02/08 Dated	201	9			
Daicti	(A)A)	· ·			
	Signature of a member	or authorized repre	sentative of a member		_
jonathan morgar	r 1				
	Typed	or printed name of	signee		

Q. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00