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MAR 21 2020

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Down to Earth Tractor Services LLC 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:
James G Downum Jr. Name of Person
Down to Earth Tractor Services LLC
429 Gulf Street
Port St. Joe FL 32456 City/State and Zip Code Idlivetoridehdagnail com VE-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James G. Downum Jr at (850) 227-5312 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$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 Address:

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liabi	orth Tractor lity Company as it now appear da Limited Liability Company)	Servics s on our records.)	LLC	
The Articles of Organization for this Limited Liability of Florida document number L20000 4101	Company were filed on	1 1	and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :		
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the de	esignation "LLC" or the	e abbreviation "L.1	C."
Enter new principal offices address, if applicable:			2020	
(Principal office address MUST BE A STREET ADD	RESS)		71 III 72 73	
			- 2	
Enter new mailing address, if applicable:			8 HA	
(Mailing address MAY BE A POST OFFICE BOX)			<u>ား</u> တ	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		ecords, enter the n	ame of the new	registered
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Flori	da 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

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 Title Name **Address** Type of Action Ge Ge Kate Downum 429 Gulf Street HAdd MGR Port St. Joe, FL 32456 Remove ____ □Change ______ □Add Remove 22 Enange _____ □Change _ □Add ______ 🗀 Add ______ □Remove

_____ □Change

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more than 90 day	s after filing.) Pursuant to 605.0 will not be listed
time, at 12	:01 a.m.	on the earlie
ve of a member		
	more than 90 day ling requirement e time, at 12	(optional) r more than 90 days after filing, ling requirements, this date at time, at 12:01 a.m.

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Filing Fee: \$25.00