

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : WINDERWEEDLE HAINES, WARD & WOODMAN, P.A.
Account Number : 0760770027750
Phone : (407) 760-4671
Fax Number : (407) 951-8201

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.
Email Address: DAMION@RLC LANDSCAPING.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THE EVENSEN GROUP, LLC

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SULKEP

OCT 14 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE EVENSEN GROUP, 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:

M. DAMION DEGRAW

Name of Person

THE EVENSEN GROUP, LLC

Firm/Company

350 Anchor Road, Suite 1000

Address

Casselberry, Florida 32707

City/State and Zip Code

damion@rlclandscaping.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GERRARD GRANT

at (407) 246-6578

Name of Person

Area Code

Day-time Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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 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

THE EVENSEN GROUP, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/22/2002 and assigned
Florida document number 1.02000031459.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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**)

350 Anchor Road, Suite 1000

Casselberry, Florida 32707

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

350 Anchor Road, Suite 1000

Casselberry, Florida 32707

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:

M. Damion DeGraw

New Registered Office Address:

350 Anchor Road, Suite 1000

Enter Florida street address

Casselberry


Florida 32707

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.


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>	<u>Address</u>	<u>Type of Action</u>
MGR	Jeffrey J. Evensen	P.O. Box 915857	<input type="checkbox"/> Add
		Longwood, Florida 32791	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Charlene A. Evensen	P.O. Box 915857	<input type="checkbox"/> Add
		Longwood, Florida 32791	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	M. Damion DeGraw	350 Anchor Road, Suite 1000	<input checked="" type="checkbox"/> Add
		Casselberry, Florida 32707	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

