

L03000055020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

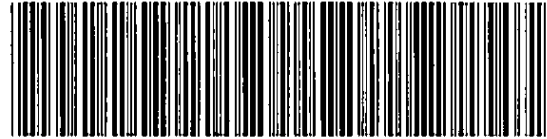
(Document Number)

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Certificates of Status \_\_\_\_\_

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2023 SEP -8 AM 10:11

TALLAHASSEE, FLORIDA

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2023 SEP -6 PM 11:11

TALLAHASSEE, FLORIDA

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 09/08/2023

**\*\*WALK IN\*\***

ENTITY NAME MILLER'S TREE SERVICE, LLC

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$25

ACCOUNT #: 120160000072

*S. R. J. P.*

Please call Tina at the above number for any issues or concerns. Thank you so much!

**AMENDED AND RESTATED  
ARTICLES OF ORGANIZATION  
of  
MILLER'S TREE SERVICE, LLC**

FILED  
2023 SEP -8 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to Section 605.0202 of the Florida Revised Limited Liability Company Act (the "*Act*"), the undersigned, being the sole manager of Miller's Tree Service, LLC, a Florida limited liability company (the "*Company*"), hereby adopts the following Amended and Restated Articles of Organization of the Company to supersede the heretofore existing articles of organization of the Company and any and all amendments thereto, and certifies that:

- (1) The name of the limited liability company is Miller's Tree Service, LLC.
- (2) The articles of organization of the Company were filed with the Secretary of State of the State of Florida on December 22, 2003 under document number L03000055020.
- (3) The articles of organization of the Company, as amended to date and presently in effect, are hereby amended and restated in their entirety as follows:

**ARTICLE 1  
NAME**

The name of this limited liability company is Miller's Tree Service, LLC (the "*Company*").

**ARTICLE 2  
ADDRESS**

The mailing address and street address of the principal office of the Company are as follows:

4951 Woodlane Circle  
Tallahassee, FL 32303

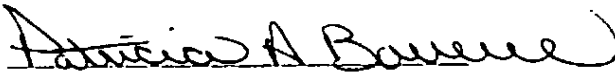
**ARTICLE 3  
REGISTERED AGENT; REGISTERED OFFICE**

The name and street address of the registered agent of the Company in the State of Florida are as follows:

Name:	NRAI Services, Inc.
Street Address:	1200 South Pine Island Road Plantation, FL 33324

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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 relating 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 of the Florida Statutes.

By:   
Name: Patricia A. Boyer  
Title: Assistant Secretary

#### **ARTICLE 4 EFFECTIVE DATE AND TIME**

These Amended and Restated Articles of Organization of the Company are effective as of the date filed with the Secretary of State of the State of Florida.

#### **ARTICLE 5 PURPOSE**

The Company is authorized to engage in any lawful act or activity for which limited liability companies may be organized under the Florida Revised Limited Liability Company Act.

#### **ARTICLE 6 DURATION**

The period of duration of the Company is perpetual. The date with which the existence of the Company began was December 22, 2003.

#### **ARTICLE 7 MANAGEMENT**

The Company shall be manager-managed.

*[Signature Page Follows]*

IN WITNESS WHEREOF, the undersigned has executed these Amended and Restated Articles of Organization of the Company as of the 8th day of September, 2023.

SOLE MANAGER:

BOWEN FALLS CAPITAL, LLC

By: 

Name: Drury J. Heinz

Title: Chief Executive Officer

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