

L04000045763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
10 NOV 16 PM 2:31

NOV 16 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Swelland's Silt Fence 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:

Shan Swelland
Name of Person

Swelland's Silt Fence Services, LLC
Firm/Company

19514 Midway Blvd.
Address

Pt. Charlotte, FL 33948
City/State and Zip Code

sswelland1120@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shan Swelland at 772 370-6289
Name of Person Area Code & Daytime 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 22, 2010

SHAN SWELLAND
19514 MIDWAY BLVD.
PT. CHARLOTTE, FL 33948

SUBJECT: SWELLAND'S SILT FENCE SERVICES,LLC
Ref. Number: L04000045763

We have received your document for SWELLAND'S SILT FENCE SERVICES,LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 710A00017753

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

10 NOV 16 PM 2:31

Swelland's Silt Fence Services, 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 6/18/04 and assigned
Florida document number L04000045763

This amendment is submitted to amend the following:

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

Swelland's Construction Services, LLC

The new name must be distinguishable and end with 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)

19514 Midway Blvd.
Pt. Charlotte, FL 33948

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19514 Midway Blvd.
Pt. Charlotte, FL 33948

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:

Shan Swelland

New Registered Office Address:

19514 Midway Blvd.

Enter Florida street address

Pt. Charlotte

City

Florida

33948

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 608, 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.

Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Shan J. Swelland	19514 Midway Blvd. Port Charlotte, FL 33948	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Melanie J. Swelland	19514 Midway Blvd. Port Charlotte, FL 33948	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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SECRETARY OF STATE
DIVISION OF CORPORATION

Dated _____


Signature of a member or authorized representative of a member

SHAN SWELLAND

Typed or printed name of signee