L05000039498

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, ,			
(Document Number)			
(2000)			
Certified Copies Certificates of Status			
Cerunicales of Status			
Special Instructions to Filing Officer:			
·			

Office Use Only



800171965128

03/22/10--01057--019 **25.00

TILEU
2010 HAR 22 AM 11: 07
SECRETARSEE, FLORID

T. CLINE MAR 2 3 2010

EXAMINER

COVER LETTER

IO: Registratio Division of	n Section Corporations			
SUBJECT:	Great Dane	s Landscaping, LLC.		
		nited Liability Company		
The enclosed Article	s of Amendment and fee(s) are st	ibmitted for filing.		
Please return all com	espondence concerning this matte	er to the following:		
		Christina Bowman		
		Name of Person		
	First A	rnerican Financial Services	2010 MAR 22 AM 11: 07 SECRETARY OF STATE TALL AHASSEE, FLORID	
	•	Firm/Company	ARE ARE	
2430 Estancia		30 Estancia Blvd. St. 205	AR 22 ETARY HASSE	
		Address		
	Clearwater, FL 33761			
		City/State and Zip Code	STATE FLORIDA	
	E-mail address:	Support@fafsinc.com (to be used for future annual report notifica		
For further information	on concerning this matter, please	1	•	
C	hristina Bowman	s _t (727) 7*	12-2214	
Nen	ne of Person	Area Code & Daytime T		
Enclosed is a check fo	or the following amount:			
₹ \$25.00 Filing Fee	\$30.00 Filing Pee & Certificate of Status	S55.00 Filing Pee & Certified Copy (additional copy is enclosed)	S60.00 Filing Pec, Certifloate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314		STREET/COURIER Registration Section Division of Corporati	_	
		Clifton Building 2661 Executive Cente Tallahassee, FL 3230	r Circle	
		Sp. Transfer		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Great Danes I	<u> Landscaping, Li</u>	LC.		
(Name of the Limited Cability Cor (A Florida Limit	npany as it now appeared Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Comp	any were filed on	04/19/2005	and assigned	
Florida document numberL05000039498				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company he	<u>re</u> :	2010 TALL	
The new name must be distinguishable and end with the words "I "L.L.C."	Imited Liability Comp	any," the designation "i		
Enter new principal offices address, if applicable:			FO	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>		FEST	
			AT A	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	- 	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	office address on o here:	our records, enter t	he name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address . Florida			
	City		Zip Code	

Naw 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager dr Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> Name Address Type of Action

MGR	Gene G. Gingeleski	8703 Gettysburg Way Tampa, FL 33635	Add Remove
			Add
			Remove
	•	ASS.	R 22
		in (Remove ["")
		OS RESIDA	07
			□Add □Remove
			Add
			Remove
D. Ifamend	ing any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
			- -
			_
			- .
Dated	11/1/	·	_
		`	
Α.	GENE-GREG	or authorized representative of a member ORY GINGELESKI or printed name of signee	
	1 y peu u	a humor name or silvine	

Page 2 of 2

Filing Fee: \$25.00

Kristin Gingeleski president