L05000045858

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PICK-UP WAIT MAIL				
(Business Entity Name)				
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FEB -2 2010

EXAMINER

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02/01/10--01049--026 **25.00

10 FEB - 1 PM 2: 46
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

COVER LETTER

Division of Corporations						
SUBJECT:	SOUTHERN	LAWN CARE LLC				
SUBJECT:		ted Liability Company				
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.				
Please return all correspon	dence concerning this matter	to the following:				
	RO	ONDAL RICKY WHITE				
		Name of Person				
	SOUT	HERN LAWN CARE LLC				
		Firm/Company				
	5810 LAURELWOOD DR					
	Address					
		PECT//EW/ El 32520				
	CRESTVIEW, FL 32539 City/State and Zip Code					
	·	,				
	E-mail address: (t	o be used for future annual report notific	ation)			
For further information cor	ncerning this matter, please c	all:				
RONDAL	RICKY WHITE	ai(82-3098			
Name of I	Person .	Area Code & Daytime	Telephone Number			
Enclosed is a check for the	following amount:					
▼ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTHERN LAV (<u>Name of the Limited Liability Compar</u> (A Florida Limited L			
The Articles of Organization for this Limited Liability Company	were filed on	MAY 09, 2005	and assigned
Florida document numberL05000045858			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records, enter t	he name of the new
Name of New Registered Agent:			10 F
New Registered Office Address:	π.	nter Florida street addr	EM B
	E7.		SEE P
·	City	, Florida	Tap Code
New Registered Agent's Signature, if changing Registered Agent:			: 46

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 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>

MGRM SHEILA A. WHITE 5810 LAURELWOOD DR CRESTVIEW, FL 32539	Add Remove
] Add] Remove
	Add Remove
] Add] Remove
	Add Remove
	Add Remove
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) RONDAL RICKY WHITE CHANGE TO 100% OWNER	
EFFECTIVE DATE: FEB. 1, 2010	
ASSE -	10 FEB - 1 PH
RONDAL RICKY WHITE	2: 6

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Filing Fee: \$25.00