# L05000090372

(Requestor's Name)			
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### **COVER LETTER**

Division of Corporations				
SUBJECT: C. ROBBINS LANDSCAPE & LAWRCARE 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:				
Michael Rassi Name of Person				
Koi LandScape & Lawncare, LLC				
P.O. BOX 430875				
Ormand Beach, Fr. 32173  City/State and Zip Code  KDI OWTS & NOT HOLL COM  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Michael Rassi at 386, 519-8569  Area Code Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certificate of Status & 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 13, 2015

MICHAEL L RASSI PO BOX 730875 ORMOND BEACH, FL 32173

SUBJECT: KOI LANDSCAPE & LAWNCARE, LLC

Ref. Number: W15000046893

We have received your document for KOI LANDSCAPE & LAWNCARE, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 415A00014599

# TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2015 AUG 31 AM 10: 15

SECHETARY OF STATE TAIL ANASSEE, FLORIDA

C. Robbins Landscape and Lawncare 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 Lial Florida document number L05000090372	bility Company	were filed on 9/13/2005	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liabi	ility company here:	
The new name must be distinguishable and contain the wor	ds "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		12 Woodshire Lane	
(Principal office address MUST BE A STREET ADDRESS)		Palm Coast, FL 32164	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 730875 Ormond Beach, FL 3217	3
B. If amending the registered agent and/o registered agent and/or the new registered offi			cords, enter the name of the new
Name of New Registered Agent:	Michael Rassi		
New Registered Office Address:	12 Woodshire I	Lane Enter Florida street e	addina co
	Palm Coast		, Florida 32164
		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.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member Title Name Address **Type of Action** 9 abacus avenue Gracy Robbins ORMOND Beach 1232174 Remove ☐ Change MGR Michael Rassi 12 Woodshire Lane Coost, FL 321/04 ☐ Change ☐ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change □ Add ☐ Remove \_□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

or removed from our records:

	Belos meres (Anach additional se	ans, y necessary.)
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Note: If the date inserted in this b	e date of filing:  ust be specific and cannot be prior to date of filing or more than block does not meet the applicable statutory filing require Department of State's records.	ements, this date will not be listed as the
f the record specifies a delayed b) The 90th day after the re-	ed effective date, but not an effective time, a cord is filed.	t 12:01 a.m. on the earlier of:
Dated August 26	2015	
Dated		
6		
	Signature of a member or authorized representative of a mer	nber
	•	
Michael Rassi		
<del></del>	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00