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(Re	equestor's Name)	
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AUG 0 7 2015 S. YOUNG

COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT: RICKO	and Construct	bin 160			
SUBJECT: ///OND		ted Liability Company	4		
	•				
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.			
Please return all correspon	dence concerning this matter t	to the following:			
	Chauncey K.	struction LLC			
	33 Lake	Firm/Company			
	20 Make	Address			
	Debury, FL	2 30713			т]
				၂ တ	
	Chauncey C'C	Kard C 1/4/100 . Com	?		
		•	201011)	- T	****
For further information co	ncerning this matter, please ca	MI:	: <u>:</u>	- -	
Chauncey Nice Name of	Person	at (321) 262- Area Code Daytime	5396 Telephone Number	-	
Enclosed is a check for the	e 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 St Certified Copy (additional copy is a	atus &	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kickard Luistruction.	LLC	
(Name of the Limited Liability Com	pany as it now appears on out d Liability Company)	r records.)
The Articles of Organization for this Limited Liability Compar	ny were filed on	10 900 5 and assigned
	my were med on	and assigned
Florida document number <u>L 050000 99551</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
Kickard Construction and Landso	caping, LLC	,
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NA	
(Principal office address MUST BE A STREET ADDRESS)	<i>'</i>	-1 ? ch
		5
Enter new weiling address if annicables	NIA	; ; · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		1 2 5
(Mailing address MAY BE A POST OFFICE BOX)	- i	<u> </u>
		323
D. 16	- **	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		records, enter the name of the new
Name of New Registered Agent:		
Name of New Registered Agent.		, -
New Registered Office Address: \mathcal{N}/\mathcal{H}		
•	Enter Florida stre	eet address
		, Florida
	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Title **Type of Action** AMBR howra Rickord 33 Lake Dr.
Debury, FL 32713 Add ☐ Remove ☐ Change □ Add ☐ Remove _□ Change Remove ☐ Change □>Add _□ Remove __ Change _□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

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Effective date, if other than the date of filing:	(optional)	<u> T]</u>
If an effective date is listed, the date must be specific and cannot be prior to date of filing or mor Note: If the date inserted in this block does not meet the applicable statutory filing	e than 90 days after filing.) Pur requirements, this date will	suant to 605.0207 (3 not be listed as th
document's effective date on the Department of State's records.	35	32
he record specifies a delayed effective date, but not an effective tin The 90th day after the record is filed.	ne, at 12:01 a.m. on t	the earlier of:
Dated 8/1/2015, 8:00 Am.		
by BO		
Signature of a member or authorized representative of	f a member	
Chauncey Kickard		
Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00