

L05000101912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

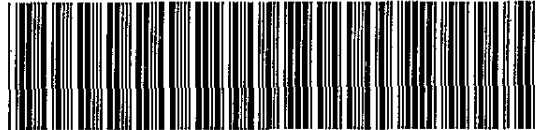
(Business Entity Name)

(Document Number)

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2005 OCT 24 PM 12:20
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN OCT 26 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wilfrid's Quality Tree Service 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:

Lapreta D. Jackson
(Name of Person)
Wilfrid's Quality Tree Service
(Firm/Company)
P.O. Box 20906
(Address)
West Palm Beach, FL. 33416
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Lapreta D. Jackson at (561) 844-8787
(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

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

Wilfrid's Quality Tree Service LLC
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on Oct. 17, 2005 and assigned document number L05000101912.

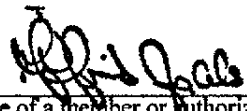
SECOND: This amendment is submitted to amend the following:

Lparet D. Jackson is to be removed as a Manager/Member
She is only to be listed as a registered agent only.
Thsi was submitted on the application in error.

Thank You!
Wilfrid Facile

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TALLAHASSEE, FLORIDA

Dated October 20, 2005.



Signature of a member or authorized representative of a member

Wilfrid Facile

Typed or printed name of signee

Filing Fee: \$25.00