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T. HAMPTON

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EXAMINER

## **COVER LETTER**

SUBJECT:	West Volusia	a Tree Service LLC			
		ited Liability Company			
•					
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Evan Keller Name of Person			
		Name of Person	•		
	West	Volusia Tree Service LLC			
		Firm/Company			
		136 S. Sheridan Ave			
		Address			
		DeLand FL 32720			
		City/State and Zip Code	<del></del>		
••	eva	an@treeworknow.com			
	E-mail address: (	to be used for future annual report notific	ation)		
For further information	concerning this matter, please of	call:			
1	Evan Keller	at ( 386 )	301-5300		
Name	of Person	Area Code & Daytime	Telephone Number		
Enclosed is a check for	_	_			
\$25.00 Filing Fee	\$30.00 Filing Fce & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)		
MAII	LING ADDRESS:	STREET/COURIE	R ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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• TO:-

Registration Section
Division of Corporations

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appointed Liability Company	ears on our records.)		
The Articles of Organization for this Limited Liability Co. Florida document number	ompany were filed on	January 3, 2006	and assig	gned
This amendment is submitted to amend the following:				
Articles of Organization for this Limited Liability Company were filed on				
Tree	(A Florida Limited Liability Company)  Organization for this Limited Liability Company were filed on			
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Com	pany," the designation "LI	.C" or the ab	breviation
Enter new principal offices address, if applicable:				<u> </u>
(Principal office address MUST BE A STREET ADDR	ESS)		99	SEC
			DEC	문품.
Enter new mailing address, if applicable:				200
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			<u>က</u>	AA
		our records, enter th	e name of	the new
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Florida street addr	ess	
		, 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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

	<u>Name</u>	Address	Type of Action
			Add Remove
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			Add Remove
<del></del>			Add Remove
<del></del>			Add Remove
_	<u> </u>		Add Remove
meno	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	OPDEC
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