206000037159

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EXAMINER

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TAIL AHASSEE, FLORID.

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COVER LETTER

	tion Section of Corporations		
SUBJECT: Gr	eenCo, LLC		0
		imited Liability Company)	-
The enclosed Arti	cles of Amendment and fee(s) are	submitted for filing.	
Please return all c	orrespondence concerning this mat	ter to the following:	
	Benjamin J. Green		
		(Name of Person)	
	GreenCo, LLC		200 TAL TAL
		(Firm/Company)	2009 MAR 23 PH 3: 45 SECRETARY OF STATE ALLAHASSEE, FLORIDA
•	2650 Countryside Blvd		ARY ASSE
		(Address)	P P 1
	Clearwater, FL 33761		STATE LORIDA
		(City/State and Zip Code)	DA S
For further inform	nation concerning this matter, pleas	e call:	
Benjamin J. Gre		at (_727)_742-4699	
	(Name of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a chec	ck for the following amount:		,
2 \$25.00 Filing	Fee \$\square\$\$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 Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GREEN CO, LLC				
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Compar	ny were filed on 4/10/2006	and assigned		
Florida document number <u>I_06000037159</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lis	ability company here:			
The new name must be distinguishable and end with the words "Li	mited Liability Company," the designation			
"L.L.C."		2009 HAR SECRETA		
Enter new principal offices address, if applicable:		CR 3		
(Principal office address MUST BE A STREET ADDRESS)				
		SER 23 F		
		## 3. U		
Enter new mailing address, if applicable:				
• • • • • • • • • • • • • • • • • • • •		<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)		<u>></u>		
·		·		
B. If amending the registered agent and/or registered	office address on our records enter	the name of the ne		
registered agent and/or the new registered office address he		the name of the ne		
Name of New Registered Agent:				
Than of Non National Argent.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
New Registered Office Address:	(F El I			
	(Lnier riorida street d	ida street 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 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 MGRM = Managing Member

Title .	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Brandon W. Smith	1869 Laurelwood Ln. Dunedin, FL 34698	Add Remove
		Dunedin, FL 34090	Remove
····			Add Remove
			Add Remove
		*	REDOVE TALLARE
			ASS Rémove
			FLORE
			Pan Hanove
D. If amen	ding any other information, ente	r change(s) here: (Attach additional sheets	, if necessary.)
	, ,	·	
	11, 10, 10, 11, 11, 11, 11, 11, 11, 11,		
Dated	3- (8	2007	
	Signature of a	member or authorized representative of a mem	2 / 0 9 ber
	Ben.	Typed or printed name of signee	•

Page 2 of 2

Filing Fee: \$25.00