

**L07000019600**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

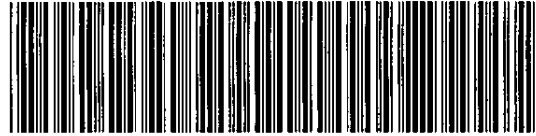
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**FILED**  
2009 JUN 24 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**  
JUN 25 2009  
**EXAMINER**

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TALLAHASSEE-LEON LAWN CARE, 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:

FRANK BRINSON

Name of Person

TALLAHASSEE-LEON LAWN CARE, LLC

Firm/Company

8427 SAND RIDGE COURT

Address

TALLAHASSEE, FLORIDA 32305

City/State and Zip Code

newbirthhealingministries@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANK BRINSON

Name of Person

at ( 850 ) 544-7902

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

FILED

2009 JUN 24 PM 12: 59

TALLAHASSEE - LEON LAWN CARE, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on FEBRUARY 21, 2007 and assigned Florida document number LO7000019600.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8427 SAND RIDGE COURT  
TALLAHASSEE, FLORIDA 32305

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8427 SAND RIDGE COURT  
TALLAHASSEE, FLORIDA 32305

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

FRANK BRINSON

New Registered Office Address:

8427 SAND RIDGE COURT

Enter Florida street address

TALLAHASSEE, Florida 32305

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.

Frank Brinson  
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	LEON M. BIEGALSKI	1462 APPLEWOOD WAY TALLAHASSEE, FL 32312	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	RYAN ROBINSON	2139 LONGVIEW DRIVE TALLAHASSEE, FL 32303	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	FRANK BRINSON	8427 SAND RIDGE COURT TALLAHASSEE, FL 32305	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_, \_\_\_\_\_.

Frank Brinson  
Signature of a member or authorized representative of a member  
FRANK BRINSON  
Typed or printed name of signee

2009 JUN 24 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED