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**TO: Registration Section
Division of Corporations**

SUBJECT: Lawn Pro 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:

Gerald L. Ramm
Name of Person
Lawn Pro LLC
Firm/Company
1880 Knox McRae Dr. 101C
Address
Titusville, FL 32780
City/State and Zip Code
Lawn010@icloud.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Gerald L. Ramm at (**321**) **615-4507**
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

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

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Millennium Land LLC	21516 Hampton St.	<input checked="" type="checkbox"/> Add
		Clinton TownShip, Mi 48036	<input type="checkbox"/> Remove
MGR	Gerald L. Ramm	1880 Knox McRae Dr. 101C	<input checked="" type="checkbox"/> Add
		Titusville, Fl 32780	<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


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 2014

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated December 8, 2014



Signature of a member or authorized representative of a member

Gerald L. Ramm

Typed or printed name of signee

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