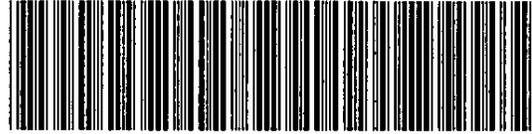


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TALLAHASSEE, FLORIDA

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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**A. LUNT**

OCT - 2 2008

**EXAMINER**

Office Use Only

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CODSA LawnCare, 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:

David L. Martin  
(Name of Person)

CODSA LawnCare, LLC  
(Firm/Company)

3435 Mallery Road  
(Address)

Vernon, FL 32462  
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

**FILED**

For further information concerning this matter, please call:

David L. Martin at (850) 535-9571  
(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

GDSA Lawncare, LLC

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

The Articles of Organization for this Limited Liability Company were filed on January 17, 2008 and assigned Florida document number LO80000016247

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3435 Mallery Road  
Vernon, FL 32462

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:

David L. Martin

New Registered Office Address:

3435 Mallery Road  
(Enter Florida street address)

Vernon  
(City)

Florida

32462  
(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.

David L. Martin

(If Changing Registered Agent, Signature of New Registered Agent)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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	Gabriel D. Martin	115 Manistee Dr Panama City Beach, FL 32413	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
* See below MGRM	David L. Martin	3435 Mallory Road Vernon, FL 32462	<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
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

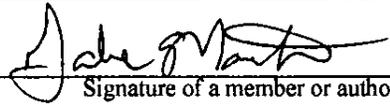
SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 2008 OCT 13  
 10:13 AM

FILED

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

Gabriel P. Martin will no longer be a member of GDSA Lawncare, LLC. David L. Martin, who is a current member will now become the managing member, as well as the new registered agent.

Dated September 25, 2008.

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member  
Gabriel P. Martin  
 \_\_\_\_\_  
 Typed or printed name of signee