

LO8000026475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

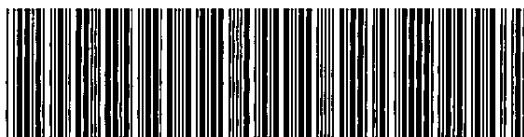
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

AUG 28 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D + J Caring for Lawns Service
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:

Diane P Spears
Name of Person

D + J Caring for Lawns Service LLC
Firm/Company

P.O. Box 2760
Address

Bunnell, Florida 32110
City/State and Zip Code

✓ djspears@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane P Spears at ^{cell} (386) 569-6836 ^{home} 386 - 447-7822
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**

D+J Caring for Lawn Services 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 3.13.08 and assigned
Florida document number 608000026475.

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: N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Diane R Spears Owner

New Registered Office Address:

2303 N State Road

Enter Florida street address

Bunnell

City

Florida 32110

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.

Diane R Spears
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

Title	Name	Address	Type of Action
<u>mgr</u>	<u>Hellie C Davis</u>	<u>PO Box 2760</u> <u>Bunnell, Florida 32110</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGR/only</u>	<u>Jimmie Evans</u>	<u>PO Box 2760</u> <u>Bunnell, Florida 32110</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Mgr/owner</u>	<u>Diane B Spears</u>	<u>P.O. Box 2760</u> <u>Bunnell, Florida 32110</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Mgr/owner</u>	<u>Darren A Davis Sr</u>		<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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FLORIDA

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

Agreement to purchase business equipment
and client accounts were voided and
not signed by both parties. Too many
misunderstood issues canceled a contract/
agreement for purchase

Dated 8.26.2009

Hellie C Davis Jimmie L Evans
Signature of a member or authorized representative of a member
Diane B Spears Jimmie L Evans
Typed or printed name of signee