10800031072

(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:
Wrong Form
Office Use Only



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SECRETARY OF STATE

K, SALY AUG 10 ZO18



July 20, 2018

CHAUNCEY, PERONTO & CO., CPAS. PA CHAD CHAUNCEY 212 LAKE HARRIS DR. LAKELAND, FL 33813

SUBJECT: JERO IRRIGATION & LAWN CARE LLC

Ref. Number: L08000031072

We have received your document for JERO IRRIGATION & LAWN CARE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 918A00014946

Karen A Saly Regulatory Specialist II

COVER LETTER

TO:	Registration Se Division of Cor							
AT 185 1814	JERO IRRIGATION & LAWN CARE, LLC							
SUBJE	Name of Limited Liability Company							
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please re	eturn all correspo	ondence concerning this matter	to the following:					
		CHAD CHAUNCEY						
			Name of Person					
		CHAUNCEY, PERONTO	0 & CO, CPAs, PA					
		-	Firm/Company	<u> </u>				
		212 LAKE HARRIS DRI	VE					
	Address							
		LAKELAND, FL 33813						
	City/State and Zip Code							
		CHAD@CHAUNCEYCPA E-mail address: (A.COM to be used for future annual report notif	ication)				
For furth	ner information c	oncerning this matter, please ea	ill:					
CHAD (CHAUNCEY		863 648-0123					
	Name o	f Person	Area Code Daytime	: Telephone Number				
Enclosed	I is a check for th	ne 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)				
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURI Registration Section Division of Corpora Clifton Building	n				

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

18 AUG-9 PM 10: 00

IALLAHASSEE, FLORIDA

JERO IRRIGATION & LAWN CARE, LLC

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

	were filed on 3/26/2008 and a	issigned
Florida document numberL08000031072		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
TIM JERO IRRIGATION & LAWN CARE, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation	1L.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)		
B. If amending the registered agent and/or registered off	Too addrace on our records, enter the nam	
registered agent and/or the new registered office address here Name of New Registered Agent:		e of the new
Name of New Registered Agent:		e of the new
		e of the new
Name of New Registered Agent:	Enter Florida street address	
Name of New Registered Agent:		
Name of New Registered Agent:	Enter Florida street address	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: 18 AUG -9 PM 10: 00 MGR = Manager AMBR = Authorized Member <u>Title</u> Address Type of Action Name 1 □ Add ☐ Remove □ Change _□ Add ☐ Remove _□ Change _□ Remove Change □ Add ☐ Remove ___ Change _____ Add _□ Remove _ Change _ 🗆 Add □ Remove

_□ Change

			 -	18	AUG - C
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					ORIDA
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ffective	date, if other t	han the date of filing:		(optional)	
`an effecti <mark>vote:</mark> If i	ive date is listed, the date inserted	e date must be specific and cannot in this block does not meet the on the Department of State's re-	be prior to date of filing or applicable statutory fil		
		delayed effective date, b the record is filed.	out not an effective	time, at 12:01 a.m. (on the earlier of:
Dated	8/4/18				
	' ' /				
			or authorized representati		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00