## 108000035707

| (Re                     | equestor's Name)  |             |
|-------------------------|-------------------|-------------|
| . (Ad                   | dress)            |             |
| (Ad                     | dress)            |             |
|                         |                   |             |
| (Cit                    | y/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | me)         |
|                         |                   |             |
| (Do                     | cument Number)    | ,           |
|                         |                   |             |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
| ·                       |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |

Office Use Only



200125050692

04/23/08--01037--005 \*\*30.00

2008 APR 23 AM II: 07
SECRETARY OF STATE

T. CLINE

APR 2 4 2008

**EXAMINER** 

## **COVER LETTER**

| TO: Registration Section' Division of Corporation | ons  |  |                                |                  | •        |
|---|--|--|--------------------------------|------------------|----------|
| SUBJECT: JEAN                                     | 's CONSTRU                                 | CTION SERVI  | ces, llc                       |                  |          |
|   | (Name of Limite                            | ed Liability Company)  |                                |                  |          |
| The enclosed Articles of Amend                    | ment and fee(s) are subm                   | nitted for filing.   |                                |                  |          |
| Please return all correspondence                  | concerning this matter to                  | o the following:   |                                |                  |          |
|   | RONEL                                      | (Name of Person)   |                                |                  |          |
|   |  | (Name of Person)   |                                |                  |          |
| Je  | AN'S CONSTR                                | (Firm/Company)   | Es, Lle                        |                  |          |
|   | 3210 N. J.                                 | OG RO APT 6  | 2102                           |                  |          |
|   |  | (Address)  |                                |                  |          |
|   | WEST Palm                                  | RENCH, FL 33<br>(City/State and Zip Code)                    | 3411                           |                  |          |
|   | (  | (City/State and Zip Code)                                    |                                |                  |          |
| For further information concerni                  | ng this matter, please cal                 | 1:   |                                |                  |          |
| Ponel (Name of Perso                              | TEA W                                      | at ( <u><b>561</b>)</u> <b>889</b> -<br>(Area Code & D       | 525/<br>aytime Telephone Numbe | 2008 APR SECRETA | ·        |
|   |  |  |                                | R 23<br>TARY     | -        |
| Enclosed is a check for the follo                 | wing amount:                               |  |                                | AMI<br>E.F.F.    |          |
|   | 0.00 Filing Fee &<br>Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is encl | osed) Certified                | te of Status     | ار<br>(ا |
|   |  |  | •                              | • •              |          |

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   | SECRI    | 20 <b>08 A</b> | n4-1  |
|---|----------|----------------|-------|
| OF  | RETAR'   | APR 23         |       |
| TEAN'S CONSTRUCTION SERVICES, LLC  (Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company) | EE, FLOR | AM II: (       |       |
| The Articles of Organization for this Limited Liability Company were filed on   | 008      | and ass        | igned |
| Florida document number <u>L08000035707</u> .   |          |                |       |
| This amendment is submitted to amend the following:   |          |                |       |

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

JEAN'S LANDSCAPING & MAINTENANCE SERVICES, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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:  | N/A               |               |
|--------------------------------|-------------------|---------------|
| New Registered Office Address: | N/A               |               |
|                                | (Enter Florida st | reet address) |
|                                | N/A_, Flor        | rida          |
| _                              | (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.

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

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

| MGR = M<br>MGRM = | anager<br>Managing Member                      |   |                |
|-------------------|--|---|----------------|
| <u>Title</u>      | <u>Name</u>                                    | <u>Address</u>                                | Type of Action |
|                   |  |   | Add Remove     |
|                   |  |   | Kemove         |
|                   |  |   | Add Remove     |
|                   |  |   | <b>-</b> -     |
|                   |  |   | Add<br>Remove  |
|                   |  |   |                |
|                   |  |   | Add<br>Remove  |
|                   |  |   | <u> </u>       |
|                   |  |   | Add Remove     |
|                   |  |   | _              |
|                   |  | ÄLLA  |                |
| D. If amen        | eding any other information, enter change(s    | here: (Attach additional sheets, if necessar) | APR 23         |
|                   |  |   | MI : 0         |
| _                 |  | LORIDA  | · 07           |
| _                 |  |   |                |
| _                 |  |   | _              |
| Dated             | APRIL 16 , 200                                 | <u>8</u> .                                    |                |
|                   | Montfeon                                       |   |                |
|                   | Signature of a member or  RONEL SEAN  Typed or | authorized representative of a member         |                |
|                   | Typed or                                       | printed name of signee                        | <del></del>    |

Page 2 of 2

Filing Fee: \$25.00