# L08000042533

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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ZECRETARY OF STATE, FALLAHASSEF, FE DEITH,

C. LEWIS
Feb. 3 2011
EXAMINER



### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 26, 2011

JOE GARRISON / GARRISON PROPERTY SERVICES PO BOX 510 DUNDEE, FL 33838

SUBJECT: GARRISON PROPERTY SERVICES, LLC

Ref. Number: L08000042533

We have received your document for GARRISON PROPERTY SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box is not acceptable.

Please return the corrected original and one copy of 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) 245-6047.

Letter Number: 511A00002206

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

## **COVER LETTER**

TO: Registration Sect Division of Corpo	ion Orations			
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SUBJECT:	Garrison Pro	perty Services, LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of Ar	mendment and fee(s) are su	bmitted for filing.		
Please return all correspond	lence concerning this matter	r to the following:		
		Joe Garrison		_
		Name of Person		
	Garris	on Property Services,	LLC	
		Firm/Company		•
		PO Box 510		
		Address		-
		Dundee, Fl, 33838		
		City/State and Zip Code		•
	jc	oe@garrisonland.com to be used for future annual repor		
	E-mail address: (	to be used for future annual repor	nt notification)	
For further information con	cerning this matter, please of	call:		
Jennif	er Esposito	at (_863 )	439-6550	
Name of P	erson		Daytime Telephone Numbe	r
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 end	closed) Certified	ite of Status &

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 ARTICLES OF ORGANIZATION

FILED

_	OF		
₩.	1	2011 FEE	3-2 PM 11 59
Gar	rrison Property Services. L	LC (SECRET	MDV no.
(Name of the Limit	rrison Property Services, L ed Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)/A	SSEE: FI DOIN
	(A Florida Limited Liability Company)		LUKINA
e Articles of Organization for this Limited	Liability Company were filed on	04/28/2008	and assigned
orida document numberL080000	42533		
nis amendment is submitted to amend the fo	ollowing:		
If amending name, enter the new name	of the limited liability company he	e <u>re</u> :	
,	-	**	
e new name must be distinguishable and end v	with the words "Limited Liability Comp	any," the designation "	'LLC" or the abbreviat
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nter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE  If amending the registered agent and gistered agent and/or the new registered Marme of New Registered Agent:	EET ADDRESS)  E BOX)  d/or registered office address on office address here:  Edward Beffa  PO Box 510 2.8609  En	Hwy 27 nter Florida street add	dress
nter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE  If amending the registered agent and a sistered agent and a sistered agent and a sistered agent and a sistered agent.  Name of New Registered Agent:	EET ADDRESS)  E BOX)  d/or registered office address on office address here:  Edward Beffa		

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 Signature of New Registered Agent

Page 1 of

MGR = Manager MG M = Managing Member **Title** Name Type of Action MGR: Joe Garrison 🗸 Add Dundee, Fl. 33838 Remove MGRM **Daphne Garrison** PO Box 510 **✓** Add **Dundee, Fl. 33838** Remove **Edward Beffa** PO Box 510 ⊡/Add Dundee Fl 33838 Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 20 January 2011 a member or authorized representative of a member Typed or printed name of signee

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:

Page 2 of 2

Filing Fee: \$25.00