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SECRETARY OF STATE
TALLAHASSEF FI ORIGINA

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GLEN'S LAWN MAINTENANCE SERVICE LLC (Name of Limited Liability Company)
(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:
rease return an correspondence concerning this matter to the following.
ALTHEA DONALLEDNI
ALTHEA DONAUSON (Name of Person)
PULLHAMAN'S ACCOUNTING ETAX SERVICE.
BUCHANAN'S ACCOUNTING ETAX SERVICE (Firm/Company)
·
537 RONAL PALM BLH BLUD
537 ROYAL PALM BCH BLVD (Address)
Roman Parm Boh F1, 33411
RoyAu PALM BCh F1. 33411 (City/State and Zip Code)
For further information concerning this matter, please call:
ror further information concerning this matter, prease can.
0
CLEN DAMPIEL at (772) 201 0138 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
The state of the forth of Westing and the
Enclosed is a check for the following amount:

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□ \$25.00 Filing Fee

△\$30.00 Filing Fee &

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status & :

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



September 16, 2008

ALTHEA DONALDSON 537 ROYAL PALM BEACH BOULEVARD ROYAL PALM BEACH, FL 33411

SUBJECT: GLEN'S LAWN MAINTENANCE SERVICE LLC

Ref. Number: L08000056315

We have received your document for GLEN'S LAWN MAINTENANCE SERVICE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6067.

Letter Number: 508A00050324

Neysa Culligan Document Specialist

Division of Communities - D.O. DOV 6997 Mellaharra - Florida 99914

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F/L E D 08 SEP 30 AM 8: 29

SECRETARY OF STATE
TALLAHASSEE FLORIDA

(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 O	Company were filed onG 9 09	and assigned
Florida document number <u>LD8 000066316</u>		
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the lim	nited liability company here:	
CLEN'S LAWN SERVICE The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office add		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida street address)	
·		, Florida
	(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, 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** ſ**™** Add Remove ☐ Add Remove 🗖 Add Remove _ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00