# L08000056847

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(business cirily Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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06/20/08--01012--010 \*\*30.00

SECRETARY OF STATE

T. HAMPTON

JUL 1 0 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DJM Lawn Care LLC (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:
Daniel J. Mason Jaclyn L. Mason (Name of Person)
Dom Lawn Care LLC (Firm/Company)
1188 La Mesa Ave
Winter Springs FL 32708 (City/State and Zip Code)
For further information concerning this matter, please call:
Daniel J. Mason at (407, 402 - 6046  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  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



DECRIVED

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June 24, 2008

DANIEL J MASON/JACLYN L MASON 1188 LA MESA AVE WINTER SPRINGS, FL 32708

SUBJECT: DJM LAWN CARE LLC

Ref. Number: L08000056847

We have received your document for DJM LAWN CARE 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):

You can only have 1 person listed as your registered agent. Please remove either Jaclyn L Mason or Daniel J Mason.

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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 008A00038114

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)
	Company were filed on June 10, 2008 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	mited liability company here:
The new name must be distinguishable and end with the we'L.L.C."	vords "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	O8
(Principal office address MUST BE A STREET ADD	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	FILED  IABLUES ATE ASSEE, FLORIDA
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad	istered office address on our records, enter the name of the new ldress here:
Name of New Registered Agent:	Daniel J. Mason
New Registered Office Address:	188 La Mesa Ave.  (Enter Florida street address)
لمد	linter Springs, Florida 32708 (City) (Zip Code)
New Registered Agent's Signature, if changing Register	

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 Chapteing Registered Agent, Signature of New Registered Agent)

Page 1 of 2

President

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> Name Address Type of Action Remove f¶ Add Remove ☐ Add Remove 🗖 Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Signature of a member or authorized representative of 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

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Filing Fee: \$25.00