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C. LEWIS

JUL 2 7 2009

EXAMINER



## **GreenWise Mulching & Recycling**

16877 E. Colonial Drive, #322 · Orlando, Florida 32820 · 407-568-6003

July 17, 2009

#### To Whom It May Concern:

Please process the attached application adding my name as Managing Member of the attached LLC and correcting the Principal Mailing Address zip code to 32820.

Feel free to contact me if you have any questions on the above at 407-342-1960.

Sincerely,

GreenWise Mulching & Recycling, LLC

John Craig

General Manager

### **COVER LETTER**

| TO:                  | Registration Se<br>Division of Cor |  |  |                |   |
|----------------------|------------------------------------|--|--|----------------|---|
| SUBJ                 | ECT:                               | GreenWise Mul                              | ching & Recycling,   | LLC            |   |
|                      |                                    | Name of Limi                               | ted Liability Company                                      |                |   |
| The er               | nclosed Articles of                | Amendment and fee(s) are sub               | omitted for filing.  |                |   |
| Please               | return all correspo                | ndence concerning this matter              | to the following:  |                |   |
|                      |                                    |  | John G. Craig  |                |   |
|                      |                                    |  | Name of Person   |                |   |
| GreenWise Mulching & |                                    |  | se Mulching & Recycli                                      | ng, LLC        |   |
|                      |                                    |  | Firm/Company   |                | <del></del>   |
| 168                  |                                    |  | 77 E. Colonial Dr., #3                                     | 22             |   |
|                      |                                    | · · · · · · · · · · · · · · · · · · ·      | Address  |                | ··············  |
| (                    |                                    |  | rlando, Florida 32820                                      |                |   |
| E-mail address       |                                    |  | City/State and Zip Code                                    |                |   |
|                      |                                    |  | greenwise@cfl.rr.com<br>to be used for future annual repo  |                |   |
| For fu               | rther information co               | oncerning this matter, please c            | -  | ŕ              |   |
|                      | Jo                                 | hn G. Craig                                | at ( 407 )   | 342-           | 1960  |
|                      | Name of                            | Person                                     |  | Daytime Telepl | hone Number   |
| Enclos               | sed is a check for th              | ne following amount:                       |  |                |   |
| <b>₹</b> 2:          | 5.00 Filing Fee                    | \$30.00 Filing Fec & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is er | nclosed)       | \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|                      |                                    | NG ADDRESS:                                | STREET/C   | COURIER AD     | DDRESS:   |

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

TO:

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

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

FILED

209 JUL 24 PM 12: 58

| GreenWise Mulching  (Name of the Limited Liability Comparing (A Florida Limited L  | 3 & Recycling ay as it now appears ability Company) | , LLC SPER SON OUR PECONDAL PA | ETARY OF STATE<br>HASSEE.FLORIDA |  |
|--|---|--------------------------------|----------------------------------|--|
| The Articles of Organization for this Limited Liability Company  | were filed on                                       | 01/30/2009                     | and assigned                     |  |
| Florida document numberL0900010450   |   |                                |                                  |  |
| This amendment is submitted to amend the following:  |   |                                |                                  |  |
| A. If amending name, enter the new name of the limited liab  | ility company here                                  | <b>5.</b>                      |                                  |  |
| The new name must be distinguishable and end with the words "Limit" L.L.C."  | ted Liability Compar                                | ny," the designation "L        | LC" or the abbreviation          |  |
| Enter new principal offices address, if applicable:  |   |                                |                                  |  |
| (Principal office address MUST BE A STREET ADDRESS)  |   |                                |                                  |  |
| Enter new mailing address, if applicable:<br>( <u>Mailing address MAY BE A POST OFFICE BOX)</u>  | 16877 E. Colo<br>Orlando, Florid                    | onial Drive, #322<br>da 32820  |                                  |  |
| B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here   | ice address on ou                                   | ur records, <u>enter t</u> l   | ne name of the new               |  |
| Name of New Registered Agent:  |   |                                |                                  |  |
| New Registered Office Address:   |   |                                |                                  |  |
|  | Enter Florida street address                        |                                |                                  |  |
|  | City  | , Florida                      | Zip Code                         |  |
| New Registered Agent's Signature, if changing Registered Agent:  | Chy   |                                | zip Coae                         |  |
| The state of the s |   |                                |                                  |  |
|  |   |                                |                                  |  |

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 = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u>                       | Address   | Type of Action   |
|--------------|-----------------------------------|---|------------------|
| MGRM         | John G. Craig                     | 2308 Bailard Avenue<br>Orlando, FL 32833                  | ✓ Add ☐ Remove   |
|              |                                   |   | Add Remove       |
|              |                                   |   | Add<br>Remove    |
| <del></del>  |                                   |   | Add<br>Remove    |
|              |                                   |   | Add<br>Remove    |
|              |                                   |   | Add<br>Remove    |
| D. If amend  | ding any other information, enter | change(s) here: (Attach additional sheets, if necessary.) |                  |
| _            |                                   |   | _                |
|              |                                   |   | <u> </u>         |
| Dated        | Signature of a n                  | nember or authorized representative of a member           | <u> </u>         |
|              | Significate of the                | Thomas D. Engel  Typed or printed name of signee          | FILE<br>JUL 24 P |
|              |                                   | Page 2 of 2   |                  |

Filing Fee: \$25.00