L09000013746

(Re	questor's Name)	_
(Ad	dress)	
(
(Ad	dress)	
(Cit	:y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
20.00		
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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FEB 2 0 2009 EXAMINER



February 13, 2009

100 Wallace Avenue Suite 100

Sarasota, Florida 34237

(941) 954-8405

Fax (941) 954-3399

ddbone@comcast.net

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

RE: Articles of Correction

To Whom it may concern:

Enclosed please find paperwork for Articles of Correction and a check for the \$25.00 filing fee.

Very Louis Yours,

David D. Bone, P.A.

DDB/klw Enclosures

COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT: Tree	Medic, LLC			
		of Limited Liability Con	mpany)	-
; Dear Sir or Madam:				
The enclosed Article	es of Correction and fee(s) a	re submitted for filing.		
Please return all com	respondence concerning this	matter to the following	g:	
David D. Bone	(Name of Person)		-	
David D. Bone, I	Firm/Company)		-	
: 100 Wallace Ave	enue STF 100			
	(Address)		-	
Sarasota, FL 34	237			
	(City/State and Zip Code)		-	
For further informati	ion concerning this matter, p	please call:		
David D. Bone		at (_941		_
(14)	ame of Person)	(Area Code d	k Daytime Telephone Number)	
STREET/COURIE Registration Section	R ADDRESS:		MAILING ADDRESS: Registration Section	
Division of Corporat	tions		Division of Corporations	
Clifton Building 1661 Executive Cent	tor Cirola		P.O. Box 6327	
Fallahassee, Florida			Tallahassee, Florida 32314	
Enclosed is a check	for the following amount:			
2 \$25 Filing Fee	\$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR

FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 TARY OF STATE business days to correct the attached articles of organization or application to transact business SEE, FLORIDA

		•			
FIRST Tree Med	-	he name of the	limited liability comp	eany is:	
SECO:	<u>ND</u> : 7	he articles of o	organization or the app	lication to transact business	
(CH	ECK TH	E APPROPRI	ATE BOX AND COMP	LETE THE APPLICABLE STA	ATEMENT
	incorrect	t, and the corre	tatement. The incorrected statement are as formed entity to be a MGM it		ement is
	Florian La	andscaping, Inc.	(DBA as Blue Frog Law	n Services)	
	4361 Ca	actus Ave.,	Sarasota, FL 3423	1	
	<u>OR</u>				
Ţ	Was defe the appro	ectively signed opriate correcti	The manner in which on are as follows:	n the document was defectively	signed and
•			<u> </u>		
٠		***************************************		1.44	
					
Dated:	Februar	y 12	111 1	2009	
:	-	Signature of	Merson D. 4	representative of a member	
		/ //	ing of Lawn King Indu	/	
:	_		Typed or printed nar		
		/	Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)	

CR2E062 (08/05)

Electronic Articles of Organization For Florida Limited Liability Company

L09000013746 FILED 8:00 AM February 10, 2009 Sec. Of State mthomas

Article I

The name of the Limited Liability Company is: TREE MEDIC, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

4545 MARIOTTI CT. STE L SARASOTA, FL. US 34233

The mailing address of the Limited Liability Company is:

4545 MARIOTTI CT. STE L SARASOTA, FL. US 34233

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

PETER FLORIAN 4545 MARIOTTI CT. STE L SARASOTA, FL. 34233

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: PETER FLORIAN

Article V

. . .The name and address of managing members/managers are:

Title: MGRM LAWN KING INDUSTRIES, INC. 4545 MARIOTTI COURT UNIT L

4545 MARIOTTI COURT UNIT L SARASOTA, FL. 34233 US

Title: MGRM BLUE FROG, INC. 316 MURRAY ROAD W. PALM BEACH, FL. 33405 US

Title: MGRM CHRISTOPHER GERBER 4545 MARIOTTI COURT UNIT L SARASOTA, FL. 34233 US

Title: MGRM MICHAEL MARQUIS 4545 MARIOTTI COURT UNIT L SARASOTA, FL. 34233 US

Article VI

The effective date for this Limited Liability Company shall be: 02/10/2009

Signature of member or an authorized representative of a member Signature: JEFFERSON D. KING

L09000013746 FILED 8:00 AM February 10, 2009 Sec. Of State mthomas