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# **COVER LETTER**

TO:	Registration Se Division of Cor			
		Landscape Services, LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Dion J. Moniz		
		Hand Arendall Harrison Sa	Name of Person ale LLC	
		35008 Emerald Coast Park	Firm/Company way, Suite 500	
		Destin, Florida 32541	Address	·····
		edurgan@greenearth-landso	City/State and Zip Code capes.net	
For furt	her information c	E-mail address: ( oncerning this matter, please c	to be used for future annual report notifiall:	cation)
Dion J.	Moniz		850 650-0010 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
<b>₽</b> \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	d is a check for th	ne following amount:	Area Code Daytime  □ \$55.00 Filing Fee &  Certified Copy	Certificate of Statu Certified Copy

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 TO ARTICLES OF ORGANIZATION **OF**

Green Earth Landscape Services,			
( <u>Name of the Lin</u>	ited Liability Company as it now ap (A Florida Limited Liability Compa	opears on our records.) my)	
The Articles of Organization for this Limited Florida document number 1.09000023795			and assigned
This amendment is submitted to amend the following	llowing:		
A. If amending name, enter the new name	of the limited liability compan	<u>ıy here</u> :	
GreenFlarth Southeast, LLC			_
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "L1C" or the	e abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		TALL ARE
(Principal office address MUST BE A STRE	ET ADDRESS)		- FE 3
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE	E BOX)		PH 3: 32
B. If amending the registered agent and registered agent and/or the new registered of		s on our records, <u>ent</u>	er the name of the new
Name of New Registered Agent:	HAND ARENDALL HARRI	SON SALE LLC	
New Registered Office Address:	35008 Emerald Coast Parkwa	ıy, Suite 500	
	l-nter	r Florida street address	
	Destin	Florida	32541
	City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		

Thereby 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 605, F.S. Or. if this document is being filed to merely reflect a change in the registered office address. I hyreby 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

#### MGR = Manager AMBR = Authorized Member

. . .

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Robert S. Knight	106 Fox Glove Lane	
		Panama City Beach, Florida 32413	□ Add
		Tanama Cay Beach, Clotted 52415	Remove
			🔚 Change
MGRM	Jeremy M. Durgan	155 Meadow Lake Drive	
		Freeport, Florida 32439	
			☐ Remove
			■ Change
			🗆 Add
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			Remove
			Change

	<del></del>
(If an ef Note:	ive date, if other than the date of filing:
the re	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	August 23 2019
	Signargre of a member or authorized representative of a member
	Jeremy Durgan Typed or printed name of signee

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Filing Fee: \$25.00