## \*10900033334

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

Office Use Only



200248404212

06/03/13--01010--004 \*\*30.00



K.SALY EXAMINER JUN 4 2013

## **COVER LETTER**

and the second control of the second control	
TO: Registration Section Division of Corporations	
SUBJECT: RUSSCI'S LAWN Service 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:	
William P. Chastain Name of Person	
Russel's Lawn Service LLC	
18410 n.w. 190 avenue	
High Springs F1, 38643 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
William Chockain at 350 316-5111  Name of Person at 350 316-5111  Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee, Certificate of Status & Certificate of Status &	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

## ARTICLES OF AMENDMENT

$\cdot$ . $\cdot$	)	FILE
ARTICLES OF O	RGANIZATION	FILED  13 JUN -3 PM 3:51
0	F	3 PM 2 2
A = A + A + A + A + A + A + A + A + A +		SHOW Arm
Kussell's (a	wn Service	ACLIATIONS OF STATE
(Name of the Limited Liability Compa	ny as it now appears on our recor iability Company)	ds.)
(A Florida Lillined I		
The Articles of Organization for this Limited Lightlity Company	ware filed on (+DCi) la	2009 and assigned
The Articles of Organization for this Limited Liability Company	were filed off 14 print to	and assigned
Florida document number <u>C0900033334</u> .		
This amendment is submitted to amend the following:		
This amendment is submitted to amend the following.		
A. If amending name, enter the new name of the limited liab	ility company here:	
,		
7°	and I inhility Common 22 day daying	untion "I I C" on the abbreviation
The new name must be distinguishable and end with the words "Limit"L.L.C."	ted Liaothty Company, the design	IATION LLC OF the above viation
	10/10/0 10 15 10	1001100
Enter new principal offices address, if applicable:	18410 M.W. 19	10 avertue
(Principal office address MUST BE A STREET ADDRESS)	High Sorina	5 Fl 3ab43
	-1131 - P. 113	
	10110000	10 0 1001 -
Enter new mailing address, if applicable:	10410 MW. 14	10 avenue
(Mailing address MAY BE A POST OFFICE BOX)	Hinn Sorina	5. Fl. 32643
	<del></del>	<del>~ / · · · · · · · · · · · · · · · · · · </del>
		· · · · · · · · · · · · · · · · · · ·
D. If amounting the societies of societies of the societi	·	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the new
registered agent and/or the new registered office address her	<u>c.</u>	
11).110	in P MASIA	li.o
Name of New Registered Agent: WIIIU	ITI P. UIUDIU	
New Registered Office Address: 19(1)	n.10> 100 Av10	$\bigcap I \circ O$
New Registered Office Address:		<u>, , , , , , , , , , , , , , , , , , , </u>

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

Enter Florida street address

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>	Name	Address	Type of Action	
mar í	Phillip n. Russell	7450 S.E. 8041 QUE	Add	
		7430 S.E. 8041 QUE Newserry, Fl. 32669		
<u>mgr</u>	William R. Chastain	18410 n.w. 1904nav High Springs, Fl. 3216	Add	
		High Springs, Fl. 326	Remove	
			Add	
			Remove	
			Add	
			Remove	
			Add	
			Remove	
			-	
			Add	
			Remove	

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Business has been sold please up DATE
	EIN
	#80-0927558
Dated	May 28, 2013
	William & Chastain
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
,	Page 3 of 3

Filing Fee: \$25.00