L04000040655

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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		A

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B. KOHR
AUG 14 2012
EXAMINER



100238371711

08/13/12--01016--019 **25.00



COVER LETTER

SUBJECT: GO	O GREEN PRODU	JCTS AND SERVIC	CES LLC				
Name of Limited Liability Company							
		•		·			
The enclosed Articles of A	mendment and fee(s) are su	bmitted for filing.	•	0.			
Please return all correspond	dence concerning this matte	er to the following:		12 NG 13 PH 3: 26			
		DOMINIKA KASIUK					
	Name of Person						
		N DDODUCT AND CE	EDVICES				
	GO GREEN PRODUCT AND SERVICES Firm/Company		RVICES	25			
	10)151 NW 59TH COUR	<u> </u>				
•	,	Address					
	PARKLAND FL 33076						
•	City/State and Zip Code						
	NICK@	BECOMETHEBANK.	COM				
		(to be used for future annual repo	ort notification)				
For further information cor	ncerning this matter, please	call:					
NICK T	ORGERSON	at (561)	692 2100	•			
Name of I			Daytime Telephone Number				
Enclosed is a check for the	following amount:						
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	nclosed) Certified C	of Status &			
		•					
	•						

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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**

GO GREEN PRODUCTS AND SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on	04/28/2009	and assigned and	
Florida document numberL0900040655		and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company he	re:	· ·	
The new name must be distinguishable and end with the words "Limited Liability Comp"L.L.C."	pany," 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:			
ALTERNATION AND ADDRESS OF THE PARTY			
-			
B. If amending the registered agent and/or registered office address on registered agent and/or the new registered office address here:	our records, enter t	he name of the ne	
Name of New Registered Agent:			
New Registered Office Address:			
\sim E	Enter Florida street address		
	, Florida	Zip Code	
City			

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	JILL DEGROTE	1051 NW 59TH COURT PARKLAND FL 33076	Add _☑ Remove
	. ,		Add Remove
			Add Remove
			Add Remove
· ·		·	Add Remove
			Add Remove
D. If amendir	ng any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
			_ _
			-
Dated	8/9, 20	12.	
_		or authorized representative of a member	
_		ILL DEGROTE	

Page 2 of 2

Filing Fee: \$25.00