

L090000098806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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14 MAY 30 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN - 2 2014

T. BROWN

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Rodriguez Landscaping Services 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:

Jorge E Rodriguez  
Name of Person

Rodriguez  
Firm/Company

4704 SW 195 WAY  
Address

Myakkae FL 33029  
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge E Rodriguez at (386) 258-2891  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed.) |
|---|--|--|--|

### 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 1, 2014

JORGE E RODRIGUEZ  
RODRIGUES LANDSCAPING SERVICES, LLC  
4704 SW 195TH WAY  
MIRAMAR, FL 33029

SUBJECT: RODRIGUEZ LANDSCAPING SERVICES LLC  
Ref. Number: L09000098806

We have received your document for RODRIGUEZ LANDSCAPING SERVICES LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown  
Regulatory Specialist II

Letter Number: 514A00009276



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 14, 2014

JORGE E RODRIGUEZ  
RODRIGUES LANDSCAPING SERVICES, LLC  
4704 SW 195TH WAY  
MIRAMAR, FL 33029

SUBJECT: RODRIGUEZ LANDSCAPING SERVICES LLC  
Ref. Number: L09000098806

We have received your document for RODRIGUEZ LANDSCAPING SERVICES LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown  
Regulatory Specialist II

Letter Number: 714A00010422

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
14 MAY 30 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Rodriguez Landscaping 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 10-13-2009 and assigned  
Florida document number LD9000098806

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Jorge E Rodriguez

New Registered Office Address:

4204 SW 195 WAY

Enter Florida street address

MIAMI

City

, Florida

33029

Zip Code

**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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Jorge E Rodriguez</u>	<u>4704 SW 195 WAY</u>	<input checked="" type="checkbox"/> Add
		<u>MIAMI FL 33029</u>	<input type="checkbox"/> Remove
<u>MGR</u>	<u>Jorge E Rodriguez Jr</u>	<u>1344 SW 173 WAY</u>	<input type="checkbox"/> Add
		<u>Bonhoke Pkwy FL 33029</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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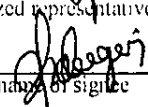
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 18, 2014, \_\_\_\_\_.

Jorge E Rodriguez   
Signature of a member or authorized representative of a member

Jorge E Rodriguez   
Typed or printed name of signee