LD90001	00865
(Requestor's Name) (Address) (Address)	600242311896
(City/State/Zip/Phone #)	12/03/1201043023 **60.00 SECRETARY OF STATE OF CORPERATIONS PH 2: 12
Office Use Only	C. LEWIS DEC - 4 2012 EXAMINER

с <u>.</u> , ,	C	COVER LETTER	
TO: Registration Sec Division of Corp		tre. ti uppter t¥ng:	۹.
SUBJECT Bloom	ningdale Lawr	n Service, LLC	
50 BJEC1.		ed Liability Company	· · · ·
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Todd Christo	Name of Person	
	Bloomingdal	e Lawn Service, Ll	LC
		Firm/Company	
	1228 Vinetre	e Dr.	
		Address	
	Brandon, Fl.	33510	
		City/State and Zip Code	
	TER2001@aol.co	OM o be used for future annual report notificatior	<u>.</u>
For further information con	ncerning this matter, please ca	-	,
Todd Christ	opher Rupp	at (813) 230-4501	
Name of 1	Person	Area Code & Daytime Tele	phone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registrat Division P.O. Box	NG ADDRESS: tion Section of Corporations & 6327 see, FL 32314	STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center (Tallahassee, FL 32301	S

L

! I

.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY	ED
DIVISION OF CO	OF STATE
2012 DEC - 3	PM 2: 12

Bloomingdale Lawn Service, 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	<u>10-19-2009</u>	and assigned
Florida document number L09000100865		

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:	1228 Vinetree Dr.	
(Principal office address MUST BE A STREET ADDRESS)	Brandon, Fl. 33510	
Enter new mailing address, if applicable:	1228 Vinetree Dr.	

(Mailing address MAY BE A POST OFFICE BOX)

Brandon, Fl. 33510

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:	Todd Christopher Rupp	
New Registered Office Address:	1228 Vinetree Dr.	
	E	Enter Florida street address
	Brandon	, Florida <u>33510</u>
	City	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 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

Page 1 of 3

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Todd Christopher Rupp	1228 Vinetree Dr.	Add
		Brandon, Fl. 33510	Remove
MGR	Kurt B. Malsch	1032 Hardwood Dr.	Add
		Valrico, Fl. 33596	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) $D_{V_{S}} S_{ECRET}$ DINISION OF ATTACL 2012 DEC -3 PM 2: 12 Dated November, 21 2012 Kur Signature of a member or authorized representative of a member Hurt Typed or printed name of signee R Page 3 of 3

Filing Fee: \$25.00