

L10000043185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

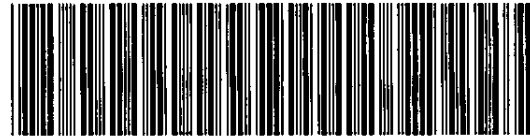
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300254775863

08/06/14--01015--005 **30.00

12/30/13--01006--009 **85.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 AUG 14 P 4:13

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 AUG 14 P 4:01

FILED

B. BOSTICK

AUG 18 2014

CLERK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Award Winning Landscapes, 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:

Julia Canipelli

Name of Person

Award Winning Landscapes LLC
Firm/Company

dba Julia's Digs

4446 Hendricks Ave #394

Address

Jacksonville, FL 32207

City/State and Zip Code

Julia@julasdigs.com

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

For further information concerning this matter, please call:

Julia Canipelli

Name of Person

at (904)

Area Code

338-1757

Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 AUG 14 P 4:13

FILED

Enclosed is a check for the following amount:

☐ \$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)

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**

Award Winning Landscapes, 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 _____ and assigned
Florida document number L10000043185.

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)

Julia Canipelli
4446 Hendricks Ave Suite 394
Jacksonville, Florida

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

City

FILED
2014 AUG 14 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>Joseph Edward Johnston</u>	<u>4446 Hendricks Ave Jacksonville, FL 32207</u>	<input type="checkbox"/> Add <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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE
TREASURY
FLORIDA

2014 AUG 14
FILED
Remove
Add
Remove

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

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

(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated 8/1/14, _____.

Julia Canipelli, owner
Signature of a member or authorized representative of a member
Julia Canipelli
Typed or printed name of signer

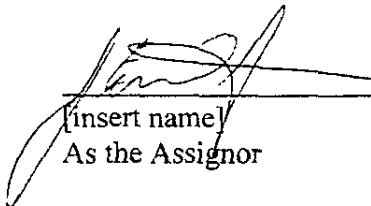
Page 3 of 3

Filing Fee: \$25.00

FILED
2014 AUG 14 P 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


ASSIGNMENT OF MEMBERSHIP INTEREST

For good and valuable consideration, the receipt and adequacy of which is acknowledged, [insert name] (the "Assignor") hereby absolutely and unconditionally sells, grants, assigns, transfers and conveys all of Assignor's membership interests in and to **AWARD WINNING LANDSCAPES, LLC** a Florida limited liability company (the "Company"), to the Company (the "Assignee"), TO HAVE AND TO HOLD unto Assignee, its successors and assigns, forever, together with all rights, title and interest associated therewith.


[insert name]
As the Assignor

**AWARD WINNING LANDSCAPES,
LLC**

By:


Julia Canipelli, President

DATE:

11/1/2013

FILED
2014 AUG 14 P 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 6, 2014

JULIA CANIPELLI
4446 HENDRICKS AVENUE #394
JACKSONVILLE, FL 32207

SUBJECT: AWARD WINNING LANDSCAPES, LLC
Ref. Number: L10000043185

We have received your document for AWARD WINNING LANDSCAPES, LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 814A00016910

FILED

2014 AUG 14 P 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 7, 2014

JULIA CAMPELLI
4446 HENDRICKS AVENUE
SUITE 394
JACKSONVILLE, FL 32207

SUBJECT: AWARD WINNING LANDSCAPES, LLC
Ref. Number: L10000043185

We have received your document for AWARD WINNING LANDSCAPES, LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 914A00000346

FILED
2014 AUG 14 P 4:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA