L10000057368

Office Use Only



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O OCT 25 PM 2: 34

J. BRYAN

OCT 2 5 2010

EXAMINER

COVER LETTER

SUBJECT:		ATE LAWN CARE LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	TRAC	CEY C. HIGGINBOTHAM	
	4.0 6		
HIGGINBOTHAM COMPANIES, INC.			
3790 N. U.S. 1			FILED 2:34 OCT 2:5 PM 2:34 ALLAMASSEE, FLORIE
	70.7		
	RIDA		
	<u> </u>		
		ntaxman@yahoo.com o be used for future annual report notifi	cation)
For further information	concerning this matter, please of	all:	
TRACEY	C. HIGGINBOTHAM	ar i	632-5726
Name of Person		Area Code & Daytime	e Telephone Number
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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

SUNSHINE STATE LAWN CARE, L.L.C.

(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 Liabilit	y Company were filed on	05/27/2010 and assigned	
Florida document numberL10000057368	•	FILED 2:34 SELLAHASSEE, FLORID	
		F 32	
This amendment is submitted to amend the following	; :	\$55 ED	
A. If amending name, enter the new name of the	limited liability company here:		
A. If amending name, enter the new name of the	united habitely company neite.		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	ODRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
B. If amending the registered agent and/or re registered agent and/or the new registered office a		r records, <u>enter the name of the new</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	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 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>	<u>Name</u>	Address	Type of Action
MGRM	WAYNE A. MASSEY	3900 SCOTLAND STREET COCOA, FL. 32927	Add Remove
			Add Remove
	·		Add Remove S
			Add 33
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
D. If amen	nding any other information, enter cl	hange(s) here: (Attach additional sheets, if necesso	лу.)
<u></u>			
Dated		2010	
	,	ember or authorized representative of a member	
	SARAH A.	MASSEY, MANAGING MEMBER	

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Filing Fee: \$25.00