

L1000000 58977

(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



100314496621

F 06/18/18--01004--001 **25.00

RECEIVED
2018 JUN 18 09 36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WLS
06-19-18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Easy Dumpster Rental, 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:

Dayna L. Miller
Name of Person

Easy Dumpster Rental
Firm/Company

4131 NW 13th Street, Suite 217
Address

Gainesville, FL 32609
City/State and Zip Code

easydumpsterrental@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dayna Miller at (352) 562 6005
Name of Person Area Code Daytime 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) ☐ \$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

Easy Dumpster Rental, 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 6/2/2010 and assigned
Florida document number L10000058977

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 contain 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:

Dayna Miller

New Registered Office Address:

13417 NW US 441

Enter Florida street address

Alachua

Florida

32615

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 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.

Dayna Miller

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
MGRM	Dayna L. Roper	13417 NW US 441	<input type="checkbox"/> Add
		Alachua FL, 32615	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Keith W. Miller	13417 NW US 441	<input checked="" type="checkbox"/> Add
		Alachua, FL 32615	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

RECEIVED
2018 JUN 18 08 55
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA

2018 JUN 11 11:11 AM
BELL COUNTY, FLORIDA
TALLAHASSEE, FLORIDA

RECEIVED
2018 JUN 18 PM 2:55
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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

(b) The 90th day after the record is filed.

Dated June 14, 2018

Dawn L Miller

Signature of a member or authorized representative of a member

Dayna L Miller

Typed or printed name of signer