10000063670

(Requestor's Name)					
(Address)					
(Address)					
(,					
(City/State/Zip/Phone #)					
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(Business Entity Name)					
•					
(Document Number)					
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EXAMINER

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SEGRETARY OF STATE ABLAHASSEE, FLORIDA

COVER LETTER

TÓ:	Registration Se Division of Cor			₹3
SUBJE	CCT:	R & B Lawn a	and Landscape, LLC	
5000			ted Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			Name of Person	
	•	R&BI	Lawn and Landscape, LLC	
			Firm/Company	,
		64	64 82nd Avenue North	
			Address	
		Pi	nellas Park, FL 33781	
		_	City/State and Zip Code	
Rbovin@yahoo.com E-mail address: (to be used for future annual report notification			ation)	
For fur	ther information co	oncerning this matter, please c	all:	
	Rocky	Carl Boven JR	at (727) 6	08-3215
Name of Person		Person	Area Code & Daytime	l'elephone Number
Enclose	ed is a check for th	e 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:

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

R & B Lawn and Landso	ape, LLC		18.1	
(Name of the Limited Liability Company as it no (A Florida Limited Liability Co	w appears on our r empany)	ecords.)		
The Articles of Organization for this Limited Liability Company were filed	d on06/1	5/10	and assig	gned
Florida document number L10000063670				
. This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability comp	oany here:			
R & D Lawn and Landscap	e, LLC			
The new name must be distinguishable and end with the words "Limited Liabili" L.L.C."	ty Company," the de	signation "LLC"	or the ab	breviation
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 addr	ess on our recor	ds enterSha i	name of	the new
registered agent and/or the new registered office address here:			A	and the same of th
		器	MAY	
Name of New Registered Agent:		S AR	26	
New Registered Office Address:		E C	72	m
	Enter Florida	street address	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	O
	1	Florida 를류	Ø) ØJ	
City	·	Z	ip 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

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 = Ma MGRM = N	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
· · · · · · · · · · · · · · · · · · ·			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_
_			_
Dated	May 23 201	<u>//</u>	_
		or authorized representative of a member	
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00