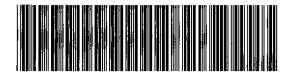
## [10000108231

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
	-	
		-

Office Use Only



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T. HAMPTON

MAY 23 2011

EXAMINER

## **COVER LETTER**

TO:	Registration Secti . Division of Corpo		·		
SHRH	ECT:	M.K.E La	nd Services, LLC		
	Name of Limited Liability Company				
		nendment and fee(s) are sul	-		
			David McKale		
			Name of Person	<del></del>	
			Firm/Company	•	
<u>.</u>			209 Granada Ave.	<del></del>	
			Address		
			Davenport, FL 33837 City/State and Zip Code		
	-	E-mail address: (	kaledavid@yahoo.com to be used for future annual report notific	cation)	
For fur	ther information cond	cerning this matter, please of	cali:		
······································	Davi Name of Pe	d McKale erson	at (863_)8 Area Code & Daytime	399-8993 Telephone Number	
Enclose	ed is a check for the f	following amount:			
<b>₹</b> 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 Registratio	G ADDRESS: on Section	STREET/COURIE Registration Section		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO SECRETARY OF STATE
ARTICLES OF ORGANIZATION DIVISION OF CORPORATIONS **OF** 

11 HAY 20 AM 18: 21

M.K ( <u>Name of the Limited L</u> (A F	K.E Land Services, LLC lability Company as it now appear lorida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liab Florida document number L100001082		Oct. 18,2010 and assigned	
This amendment is submitted to amend the follow	ring:		
A. If amending name, <u>enter the new name of t</u>	<u>he limited liability company her</u>	2:	
MI	KE Lawn Services, LLC	•	
The new name must be distinguishable and end with the "L.L.C."	the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicab	ole:		
(Principal office address MUST BE A STREET.	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		ur 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 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 = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			Add Remove
			Add Remove
<u>.</u>			Add Remove
· · · · · · · · · · · · · · · · · · ·	·		Add Remove
<del></del>			Add Remove
<u>_</u>			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_ 
			SECRETARY OF COLUMN 11 MAY 20 I
Dated	(J. 11	011 R. Q	CORPORATIONS
	-	r or authorized representative of a member	
		David McKale	

Page 2 of 2

Filing Fee: \$25.00