L10000129573

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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: Florida Pe	st and Lawn LLC		
		ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Richie Kidwell		
		Name of Person	
		Firm/Company	
	1125 Tall Pine Drive	Address	
	Apopka, FL 32712	. 1001000	
	,	City/State and Zip Code	
	richiekidwell@gmail.c		
	E-mail address: (to	o be used for future annual report notificati	on)
For further information co	ncerning this matter, please co	all:	
Richie Kidwell		at (407_)334-4621	
Name of	Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for the	e 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

		ID LAWN, LLC		
(Name of the Limited Liability (A Florida L	Company	as it now appears on our reco	rds.)	
(A Florida L	limited Lia	bility Company)	2013 SEI	
The Add to Committee for this I have the Call to the Co		2/20/2010	TALLOR and assigned	
The Articles of Organization for this Limited Liability Co	ompany w	ere filed on TE/E0/E010		
Florida document number L10000129573	·		Sec. 2 1	
			Andreas American	
This amondment is submitted to smooth the followings				
This amendment is submitted to amend the following:			ED PHIZ: 06	
A. If amending name, enter the new name of the limit	ited liabili	ity company here:	Em 6	
			**	
The Kidwell Group LLC	1 071	171122 6 94 1 1		
The new name must be distinguishable and end with the word "L.L.C."	ds "Limite	d Liability Company," the desig	nation "LLC" or the abbreviatio	
L.L.C.				
Enter new principal offices address, if applicable:		1125 Tall Pine Drive		
(Principal office address MUST BE A STREET ADDR	(ESS)	Apopka, FL 32712		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1125 Tall Pine Drive		
		Apopka, FL 32712		
Triuming timiless that DD 11 CO. O. 1 CO. DO. W.				
		_		
B. If amending the registered agent and/or regist			enter the name of the ne	
registered agent and/or the new registered office addi	ress nere:			
Name of New Registered Agent: Richie	e Kidwe			
1105	Tall Din	n Deixo		
New Registered Office Address: 1125	Tall Pine			
	Enter Florida street address			
Apop	ka	. Fla	orida	
_ - ` - i.		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 MGRM.= Managing Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action** Remove Remove <u>Rë</u>move Remove Remove Remove

If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
·	
•	
d	
	Vielle Occol
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	D 2 62

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Filing Fee: \$25.00

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