4100010103

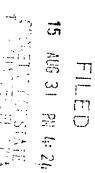
/Pa	questor's Name)	
(Re	questors Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	∋ #)
,	•	,
PICK-UP	☐ WAIT	MAIL
_		_
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
l ,		

Office Use Only



800276289918

08/31/15--01012---021 **25.09





ATTORNEYS AT LAW ESTABLISHED 1900

Clarence A. Boswell 1902-2005 David R. Carmichael Seth B. Claytor W. A. "Drew" Crawford George T. Dunlap, III Kevin M. Kohl P.O. Drawer 30, Bartow, Florida 33831 245 South Central Avenue, Bartow, Florida 33830 Phone: (863) 533-7117 Fax: (863) 533-7412

Sender's e-mail address: gtd@bosdun.com

Richard A. Lopez Keith D. Miller Frederick J. Murphy, Jr. Sean R. Parker Donald H. Wilson, Jr. Savannah Young-Cerullo

August 26, 2015

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: D& L Lawn Service, LLC

To Whom This May Concern:

Please find enclosed Articles of Amendment for the above company, together with \$25,00 fee for same.

Should you need anything further do not hesitate to contact our office.

Sincerely,

Teri Warren, Florida Registered Paralegal to George T. Dunlap, III

Enclosure

FILED 15 MG 31 M # 24

Service Services

COVER LETTER

Div	ision of Corp	orations			
SUBJECT:	D & L Lawn	Service, LLC			
ocholer.		Name of Lim	nited Liability Company		
The enclosed	d Articles of A	mendment and fee(s) are sub	mutted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		George T. Dunlap, III			
			Name of Person		
		Boswell & Dunlap, LLP			,
			Firm/Company		4
		245 S. Central Avenue			Gr.
			Address		B T
		Bartow, FL 33830		(4)	[7]
			City/State and Zip Code		D = 24
		gtd@bosdun.com			<u>.</u> <u></u>
		E-mail address. (1	to be used for future annual repo	ort notification)	
For further in	nformation coi	ncerning this matter, please ca	all		
			at () Area Code	Daytime Telephone Number	
	Name of I	Person	Area Code D	Daytime Telephone Number	
Enclosed is a	a check for the	following amount:			
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	l) Certified C	of Status &

MAILING ADDRESS:

TO:

Registration Section

Registration Section
Division of Corporations PO. 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

D & L Lawn Service, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on September 2, 2011	and assigned
Florida document number L 11000101073		
This amendment is submitted to amend the following		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		a an
(Principal office address MUST BE A STREET ADDRESS)		ω 戸
	, 	
	·	
Enter new mailing address, if applicable:		7 年 2
Mailing address MAY BE A POST OFFICE BOX)		V 38"
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>ent</u> :	er the name of the
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 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.

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 =	Authoriżed	Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
			☐ Add
			Remove
			□ Change
		150	Add
			Remove
			Change
			☐ Add
			Remove Solution Remove Remove
			□ Remove
			☐ Change
			Add
			Remove
		14/4-1	□ Change
			Add
			Remove
			☐ Change

surviving member.	
2. The adjudication of incompetency of any Member shall not in and of	itself cause the termination or dissolution
of the comany, and the business of the Company shall continue. Upon	such occurance, the Trustee, receiver,
executor, administrator, or guardian of the Member in question shall be	deemed an assignee of such Member for
the purposes of settling or managing the estate or property of the incom	petent Member
	ं
	22
tive date, if other than the date of filing: Tective date is listed, the date must be specific and cannot be prior to date of filing	(optional)
If the date inserted in this block does not meet the applicable statutory inent's effective date on the Department of State's records.	filing requirements, this date will not be list
cord specifies a delayed effective date, but not an effective 90th day after the record is filed.	
August 26, 2015 Signature of a member or authorized representation. Doree L. Johnson	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00