## L12000003123

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PICK-UP WAIT MAIL
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SECRETARY OF STATE
PARE ANASSED FOR DELIVERY

MUN'11 2013 D. BRUCE

## **COVER LETTER**

TO:	Registration Sec Division of Corp				
		K & C Mowing a	nd Maintenance LLC		
SUBJE	ЕСТ:				
	•	Name of Limi	ted Liability Company		
The en	closed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspor	ndence concerning this matter	to the following:		
		Kerri Schafer			
			Name of Person		
		K & C Mowing and N	Maintenance LLC		
	Firm/Company				
		3864 Hollycrest St			
			Address		
		Fort Myers, FL 3390	5		
		kcmechanic1@aol.co	City/State and Zip Code	74° 2	
		E-mail address: (t	o be used for future annual report notification)		-
For fur	ther information co	oncerning this matter, please c	all:	2018 JUN 10 SECRETARY PALLAHASS	(Marie
	Kerri Schafer		239 229-6127	150 PM 0 PM 0	
	Name of	Person	Area Code & Daytime Telephone Number		1220
Enclos	ed is a check for the	e following amount:			
\$25	5.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &	osed)

**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

K & C Mowing and	l Maintenance LL	.C	
(Name of the Limited Liability Con (A Florida Limite	npany as it now appea ed Liability Company)	ers on our records	<u>s.</u> )
The Articles of Organization for this Limited Liability Comp.	any were filed on	1/6/12	and assigned
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited l</u> K&C Mechanical LLC	iability company he	<u>re</u> :	
The new name must be distinguishable and end with the words "L'L.L.C."	imited Liability Comp	any," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	2		<u> </u>
		*	EG S
			# # # # # # # # # # # # # # # # # # #
Enter new mailing address, if applicable:			RY O
(Mailing address MAY BE A POST OFFICE BOX)			ES P IT
			SIA 2:
	<del></del>		29 20 20 20 20 20 20 20 20 20 20 20 20 20
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, <u>er</u>	<del>-</del>
Name of New Registered Agent:			<del></del>
New Registered Office Address:			
	E	nter Florida stree	et address
		, Florid	la
	Citv		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 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>	Address	<b>Type of Action</b>
MGR	Kerri L Schafer	3864 Hollycrest St	Add
		Fort Myers, FL 33905	Remove
MGRM	Kerri L Schafer	3864 Hollycrest St	Add
		Fort Myers, FL 33905	Remove
			Add
		···	Remove
			2018 JUNETARY PAREFERRASSE
			Add Remove Remove
			Add
			Remove
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$\mathcal{L}$	2013  ture of a member or authorized representative of a m	_

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Filing Fee: \$25.00

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