

L12000069256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

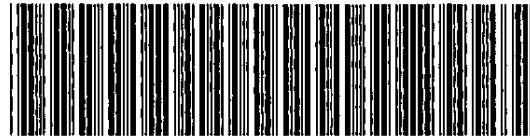
(Business Entity Name)

(Document Number)

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FILED
12 JUN -4 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
JUN -5 2012
EXAMINER

May 25th, 2012

Re: FL Doc # L12000069256

Ward Kirkland FEIN #45-5343804
325 Kirkland Drive
New Smyrna Beach, FL
32148

Please call Kandi Barnes
@ 321-412-2519 regarding matter.

Find enclosed FL DOS Amendment
to Articles of Organization of
a FL LLC. as well as
the \$25⁰⁰ filing fee.

Thank - you!

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: WARD KIRKLAND SOD & TIMBER, LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KANDI BARNES

Name of Person

c/o WARD KIRKLAND ENTERPRISES, LLC.

Firm/Company

3046 US HWY 1

Address

MIMS, FL 32754

City/State and Zip Code

WARDKIRKLANDSOD325@ATT.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KANDI BARNES

Name of Person

at (**321**)

412-2519

Area Code & Daytime Telephone Number

Enclosed is a check for the 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**

WARD KIRKLAND SOD & TIMBER, LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
12 JUN -4 PM 3: 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/23/2012 and assigned
Florida document number L12000069256.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

WARD KIRKLAND ENTERPRISES, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

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

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Allina L. Kirkland-Michaud	325 Kirkland Dr NSB FL 32168	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Kandi K. Barnes	3046 US HWY 1 MIMS FL 32754	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated MAY 24, 2012



Signature of a member or authorized representative of a member

WARD A. KIRKLAND

Typed or printed name of signee

FILED
12 JUN -4 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA