

L12000098996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

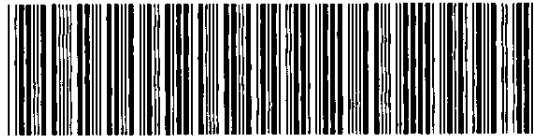
(Business Entity Name)

(Document Number)

Certified Copies Certificates of Status

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03/01/13--01020--007 **25.00

FILED
13 MAR -1 AM 11:07
FBI - MIAMI
MIAMI, FLORIDA

K. SALLY
EXAMINER
MAR 5 - 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GreenCare U.S., 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:

Gordon J. Vanscoy

Name of Person

GreenCare

Firm/Company

4530 Arnold Ave, #4

Address

Naples, FL 34104

City/State and Zip Code

gvanscoy@greencare.us

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

For further information concerning this matter, please call:

Gordon Vanscoy

Name of Person

at (**239**) **288-2222 x101**

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**

GreenCare U.S., LLC

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

FILED
13 MAR -1 AM 11:07
CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/01/2012 and assigned
Florida document number L12000098996.

This amendment is submitted to amend the following:

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

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)

4530 Arnold Ave.

Suite #4

Naples, FL 34104

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4530 Arnold Ave

Suite #4

Naples, FL 34104

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:

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

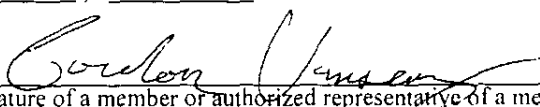
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Gordon J. Vanscoy, Jr.	1960 7th St S	<input checked="" type="checkbox"/> Add
		Naples, FL 34102	<input type="checkbox"/> Remove
MGRM	Paul G. Long	1415 Mariposa Cir.	<input checked="" type="checkbox"/> Add
		Unit 203	<input type="checkbox"/> Remove
		Naples, FL 34105	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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

Note that EIN number 46-0700747 was assigned to this entity.

(Document attached)

Dated February 26th, 2013


Signature of a member or authorized representative of a member

GORDON VANS COY
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00