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J. SAULSBERRY EXAMINER

MAR 25 2013

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	MOW4U LI	LC	
	Name of Limi	ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	R	ICHARD Hoopes	
		Name of Person	
	` <i>/</i>)	10W4W LLC	
		Firm/Company	
	2	650 ROSEHAVEN DR	
		650 ROSCHAVEN DR Address	:- 2
	W	esley chapel fl	33544
	grass	esley chapel Fl City/State and Zip Code monkey LAWN @ hot	33544 2013 HAR 21 AH 8: 20 EAIL OF THE
	E-mail address: (1	to be used for future annual report notificati	on)
For further information	concerning this matter, please c	all:	
_ RICHARD	Hoopes	at (813) 420 - 88	o/ 20
Name	of Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for t	the following amount:		
,	□\$30.00 Filing Fee &	□\$55.00 Filing Fee &	□\$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is enclosed)	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

MOW4U L	.LC	
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Companies 12000 10 2 50 7.	by were filed on $8/08/201J$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
GRASS MONKEY LAWN AND LA	NDSCAPING LLC	
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:		7a. 20
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		AR
Enter new mailing address, if applicable:		R
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		15 <u>20</u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he Name of New Registered Agent:	office address on our records, <u>ent</u> <u>re</u> :	er the name of the new
Hatthe of New Registered Agent.		
New Registered Office Address:	Enter Florida street	address
	, Florida City	Zip Code
No. 13 - 2-4 - 3 4 - 44 Ct 4 - 46 h - m - 4 - 4 - 4		-

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>	Address	Type of Action	
			Add	
			Remove	
		<u> </u>		
			Remove	
			_	
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·		-	Add Add	
			Remove	
			_ 	
			Add	
			Add	
			Remove	

D. 1	lf amen	ding any other info	rmation, enter change(s)	here: (Attach additional s	heets, if necessary.)
	_		· · · · · · · · · · · · · · · · · · ·		
		<u></u>			
	-				·
Date	ed	03/18	, 2013	1	
			Rubal	Hoon	
				uthorized representative of a	member
			RICHARD	Hoopes	
			Typed or p	rinted name of signee	

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Filing Fee: \$25.00