12000122541

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2013 JUL 17 AH 8: 30

J. SAULSBERRY EXAMINER

JUL 18 2013

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Thompson's Turf + Property Maintance, LC 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:	
Brenda Thompson Name of Person	
Thompson's Turf + Property Maintance, W	C
13590 NE 51st Lane	
Williston FL 32696 City/State and Zip Code	29 14 15 15 15 15 15 15 15 15 15 15 15 15 15
bthompsonstufa bnail com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	? !!
Brenda Thompson at (35d) 508-3541 Name of Person at (35d) Sold Area Code & Daytime Telephone Number	99 39
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	losed)

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

Thompson's Turf	ity Company as it a Limited Liability	perty Mo now appears on ou (Company)	r records.)	HC	-
The Articles of Organization for this Limited Liability Florida document number L1200012259	Company were f	,) 5 th 2012 an	ıd assigr	ned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the li	mited liability co	ompany here:			
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Lia	bility Company," the	e designation "LLC" of	r the abb	reviation
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADI	DRESS)			2	
	<u></u>		_ <u> </u>		
			1	=	
Enter new mailing address, if applicable:			78 Aug.	 -	<u>:</u>
(Mailing address MAY BE A POST OFFICE BOX)					
			<u> </u>	<u> ස</u>	·
			5.7	3 0	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		ddress on our rec	cords, <u>enter the na</u>	me of	the new
Name of New Registered Agent:					
New Registered Office Address:					
		Enter Flor	rida street address		
			_, Florida		
	City	,	Zip	Code	_
Now Designated Amenda Circumstance if the aring Designation	and Amonds				

If Changing Registered Agent, Signature of New 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
M <u>GRM</u>	Matthew Remboski	13590 NE 515t Lane	_ Add
		13590 NE SIST Lane Williston, FL 32696	Remove
		-· · · · · · · · · · · · · · · · · · ·	_
			Add
			Remove
			_
<u></u>	·		Add
		D: -	Remove
	•	10 · · · · · · · · · · · · · · · · · · ·	
		7 - P	Remove Add Remove
		100 Sept. 100 Se	Remove
			 -
			_ Add
			Remove
			-
			Add
			Remove

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
, ,	
•	
,	
•	
ated	July 12th, 2013.
	Signature of a member or authorized representative of a member
	Brends Tlanna OS 010
	Typed or printed name of signee

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Filing Fee: \$25.00

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