# 112-000157775

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# **COVER LETTER**

TO: Registration So Division of Cor			
	et Landscape Hauling,	LLC	
SUBJECT:	Name of Lim	ited Liability Company	
		,	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kenneth Simunovic		
	<u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>	Name of Person	
	Dirty Feet Landscap	e Hauling, LLC	
		Firm/Company	
	208 141st Ct NE		
		Address	
	Bradenton, FL 3421	2	20 H MY
	Dirtyfeethauling@liv	City/State and Zip Code 9.COM	
	E-mail address: (	to be used for future annual report notific	्रि⊜ 📆 😅 🔭 🔭 🔭
For further information of	concerning this matter, please o	all:	
Kenneth Simunovi	C	941 812-4583	FORME LONDON
Name o	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
<b>■</b> \$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)
MAIL	ING ADDRESS:	STREET/COURIE	CR ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## TO ARTICLES OF ORGANIZATION OF

Dirty Feet Landscape Hauling, L	LC	
(Name of the Limited Liab (A Flor	ility Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number	Company were filed on 12/18/2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the linding Dirty Feet Hauling, LLC	mited 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 ADI	DRESS)	<u> </u>
		20 1 m
Enter new mailing address, if applicable:		1 grant
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	·	the name-of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	7. 6.1
	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 605, 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

### Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Title</u> **Type of Action** <u>Name</u> **Address** □ Add □ Remove □ Add ☐ Remove \_□ Remove \_□ Remove \_ Add \_□ Remove \_□ Add ☐ Remove

Effective date, if other than the date of filing:  The effective date must be specific, cannot be prior to date of receipt or filed date an	(optional)
The effective date must be specific, cannot be prior to date of receipt or filed date an the date this document is filed by the Florida Department of State)	d cannot be more than 90 days after
,	
Datad	
Dated,	
Dated,	
Dated,	esentative of a member

Page 3 of 3

Filing Fee: \$25.00

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