## L13000028347

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JUN - 4 2013

T. HAMPTON

## **COVER LETTER**

TO:

Registration Section Division of Corporations

MORAN LAWN SERVICE, 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:

**NOE MORAN** 

Name of Person

MORAN LAWN SERVICE, LLC

Firm/Company

281 NW 43RD STREET SUITE 3

Address

OAKLAND PARK, FL 33309

City/State and Zip Code

JIMENEZACCOUNTING@GMAIL.COM

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

For further information concerning this matter, please call:

**NOE MORAN** 

at (954) 397-4225

Name of Person

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

## MORAN LAWN SERVICE, LLC

. S. P. .

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

The Articles of Organization for this Limited Liab Florida document number L13000028347	oility Company were filed on 02/25/2	and assigned SECRET
This amendment is submitted to amend the follow	ring:	FETARE SERVICE
A. If amending name, enter the new name of the	he limited liability company here:	PH 12:
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," th	ne designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	orida 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>	Name	Address <u>T</u>	ype of Action
MGRM	ISIDORO MORAN REYES	281 NW 43RD STREET #3	Add
		OAKLAND PARK, FL 33309	
			Add
			Remove
			Silving
			BON OF Remove
			PH 12: 2
			Add
			Remove
			Add
<del></del>			Remove
			Remove
			Add
			Remove

). If amending any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
hated MAY 29TH	<u>2013</u>
*	ATTAS
NOE MODA	Signature of a member or authorized representative of a member
NOE MORA	Typed or printed name of signee
	Types of primes name of signer

. . .

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF SACTIONS
DIVISION OF CORPORATIONS