## L17000140518

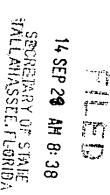
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 27, 2014

CLAYTON WILDER 10644 BOBBIE LN ROYAL PALM BEACH, FL 33411

SUBJECT: AFFORDABLE LAWN SERVICE LLC

Ref. Number: L13000040518

We have received your document for AFFORDABLE LAWN SERVICE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

Letter Number: 214A00014013

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: #1 AFFORDABLE LAWN SETVICE 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:
Clayton Wilder Name of Person
#1 Affordable Lawn Service UC
10644 Bobbie LN Address
Royal Palm Bearl F( 3341) City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Clayton Wilder at (561) 503-3969  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee \$\ \text{Certificate of Status} \ \text{Certified Copy} \ \text{(additional copy is enclosed)} \ \text{□ \$60.00 Filing Fee,} \ \text{Certified Copy} \ \text{(additional copy is enclosed)} \ \text{□ \$60.00 Filing Fee,} \ \text{Certified Copy} \ \text{(additional copy is enclosed)} \ \text{\text{Certified Copy}} \ \text{(additional copy is enclosed)} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{Certified Copy}}} \ \text{(additional copy is enclosed)} \ \text{\text{\text{Certified Copy}}} \ \text{(additional copy is enclosed)} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{Certified Copy}}} \ \text{(additional copy is enclosed)} \ \text{\text{\text{Certified Copy}}} \ \text{(additional copy is enclosed)} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{\text{Certified Copy}}} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{\text{Certified Copy}}} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{\text{Certified Copy}}}} \ \text{\text{\text{\text{Certified Copy}}}} \ \text{\text{\text{Certified Copy}}} \ \text{\text{\text{\text{Certified Copy}
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

# 1 AFFORDABLE LAWN SERVICE LLC

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

(A Florida Limited Liability Company)

Florida document number <u>L 13000040518</u> .	•	
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liabilit	y company here:	
Affordable Lawn service	LCC	•
he new name must be distinguishable and end with the words "Limited Liabilit	y Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		Īs →
Principal office address MUST BE A STREET ADDRESS)		-C + S
		<b>美國 节</b> (4)
-		SS S Parameter
		177 - C
Inter new mailing address, if applicable:	NATIONAL DESIGNATION OF THE PROPERTY OF THE PR	
Mailing address MAY BE A POST OFFICE BOX)		
-		- <del> </del>
-		
3. If amending the registered agent and/or registered offic egistered agent and/or the new registered office address here:	ce address on our records	s, <u>enter the name of the n</u>
Name of New Registered Agent:		
Name of New Registered Agent:  New Registered Office Address:	Enter Florida street addres	s
		s Orida

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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF SIMIL
TALLAHASSEE, FLORIDA