

L13 000060576

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

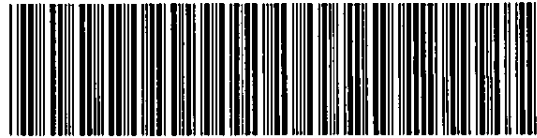
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2014 APR 15 PM 16:35
TO ADDITIONAL
SUFFICIENT OFFICERS

FILED
14 APR 15 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Stivers APR 16 2014



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 026533 7935852

AUTHORIZATION :

COST LIMIT : 525.00

ORDER DATE : February 25, 2014

ORDER TIME : 1:55 PM

ORDER NO. : 026533-010

CUSTOMER NO: 7935852

DOMESTIC AMENDMENT FILING

NAME: BEACH LANDSCAPING, LLC

EFFECTIVE DATE:

XXX__ ARTICLES OF AMENDMENT

____ RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY

XX__ PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 52920

EXAMINER'S INITIALS: _____

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Page 1 of 3

Authorized Member Being Added or Removed from the Record:

MGR = Manager

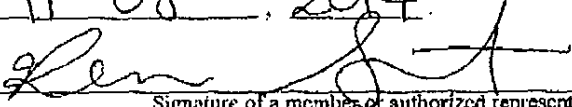
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Michael Smith	5430 Meadows Edge Drive	<input type="checkbox"/> Add
		Lake Worth, FL 33463	<input checked="" type="checkbox"/> Remove
AMBR	Renee D. Smith	5430 Meadows Edge Drive	<input checked="" type="checkbox"/> Add
		Lake Worth, FL 33463	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

14 APR 15 8:31
SEAL HALL
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated April 08, 2014.



Signature of a member or authorized representative of a member

Renee D. Smith, Member

Typed or printed name of signer

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Filing Fee: \$25.00

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