## L13000085928

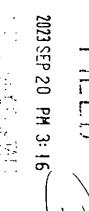
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## **COVER LETTER**

Registration Section

TO:

Divi	ision of Corp	porations		
aun in an	DR JAY PE	ST CONTROL, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		JOSHUA L. GUY		
			Name of Person	
			Firm/Company	
		3190 Cedarwood Dr		
	•			
		Holiday, FL 34691		
		Joshual.ceGuy@outlook.co	City/State and Zip Code	
			to be used for future annual report no	otification)
For further in	nformation co	oncerning this matter, please ca	all:	
Michael G. Kouskoutis, Fsq.		727 421-1334 at (		
	Name of	f Person		me Telephone Number
Enclosed is a	a check for th	ne following amount:		
■ \$25.00 F	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)
	iling Addres gistration S		Street Address: Registration S	Section
Div	vision of C	orporations	Division of Co The Centre of	orporations
	). Box 632 Ilahassee, I			roe Street. Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

DR JAY PEST CONTROLLLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our record Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Company Plorida document number 1.13000085928	were filed on 6/13/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC	C" or the abbreviat "L.L.C."
Enter new principal offices address, if applicable:	3190 Cedarwood Dr	· <u> </u>
Principal office address MUST BE A STREET ADDRESS)	Holiday, FL 34691	P
Enter new mailing address, if applicable:	3190 Cedarwood Dr	3 J
Mailing address MAY BE A POST OFFICE BOX)	Holiday, FL 34691	· · · · · ·
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, enter	the name of the new registe
New Registered Office Address:		
	Enter Florida street addre:	SS
		lorida
	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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	HAROLD J LEVEY, JR	623 E. TARPON AVE	□ Add
		TARPON SPRINGS, FL 34689	■Remove
			□Change
MGR	JOSHUA L. GUY	3190 Cedarwood Dr	
		Holiday, FL 34691	□Remove
			☐ Change
			□ Remove
			Change
			Remove
			□Change
			□Add
			□Remove
			Change
	<del></del>		
			□Remove
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(If an effective Note: If th	date, if other than the date of filing: September 15, 2033 (optional) redate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be seffective date on the Department of State's records.	605.020 listed <b>a</b>
e record spo ord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a	after the
Dated	September 15, 2023  Signature of a member or authorized representative of a member	-

Filing Fee: \$25.00