

**L13000095678**

\_\_\_\_\_  
(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:

*Amend*

Office Use Only



**000253968390**

12/23/13--01027--002 \*\*25.00

**FILED**  
13 DEC 23 PM 1:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**1 Bush, JAN 02 2014**

*f*

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Florida pool and lawn Care, 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:

David Rakowski  
Name of Person

Florida pool and lawn CARE LLC  
Firm/Company

211 Milford St.  
Address

Davenport FL 33897  
City/State and Zip Code

d-Rakowski@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Rakowski at (407) 319 3408  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Florida Pool and Lawn Care LLC  
(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 Liability Company were filed on July 5<sup>th</sup>, 2013 and assigned Florida document number L13000095698.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Florida pool and lawn care, LLC  
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 ADDRESS)

211 Milford St.  
Davenport, FL  
33897

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

David Rakowski

New Registered Office Address:

211 Milford St.  
Enter Florida street address

Davenport, Florida 33897  
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.

[Signature]  
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

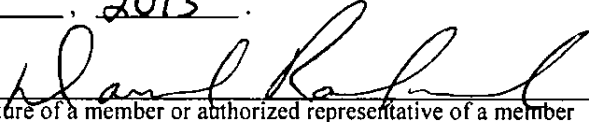
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	John Andrews	183 longview Ave.	<input type="checkbox"/> Add
		Celebration, fl	<input checked="" type="checkbox"/> Remove
		34747	
MGRM	David Rakowski	211 Milford St.	<input checked="" type="checkbox"/> Add
		Davenport, fl	<input type="checkbox"/> Remove
		33897	
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Removing John Andrews from the  
forms. John Andrews Backed out of the Business,  
I started the Business and just need my name  
on the Florida pool and lawn care LLC Info.  
Thanks

Dated 12-21-13, 2013  
December 21

  
Signature of a member or authorized representative of a member

DAVID Rakowski  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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