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## **COVER LETTER**

TO: Registration Section
Division of Corporations

Tri-State Termite & Pest Control

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:

DeAnna Ridley

Name of Person

Tri-State Termite & Pest Control

Firm/Company

16431 SW Ridley Lane

Address

Blountstown, FL 32424

City/State and Zip Code

deannaridley1@yahoo.com

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

For further information concerning this matter, please call:

DeAnna Ridley

,850<u>,</u>879-0763

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Fifing 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

Tri-State Termite and Pest Co		
(Name of the Limited Lia (A Flo	ability Company as it now appears on our recorda Limited Liability Company)	ords.)
	-	
The Articles of Organization for this Limited Liabi	ility Company were filed on July 9, 2013	and assigned
Florida document number L13000097984		and assigned of FI
		12 SEE
This amendment is submitted to amend the followi	ing:	PH
		王2
A. If amending name, enter the new name of th	e limited liability company here:	2: 4'
		9 %
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company," the design	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	(ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	X)	
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	<u>e address here</u> :	
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
Ten registeres Office Hautess.	Enter Florida s	treet address
	***	
-	, FR	orida Zin 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	<del></del>	Type of Action
MGRM	Jeremy Ridley	10516 NW Hampton Lane	Add
		Altha, FL 32421	Remove
			AddRemove
<u></u>			AUG 2 F
			PH 2: 49 Adds  Remove
			Add Remove
			Add Remove
			_

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
<u></u>			
<u></u>			
Dated August 2	2013		
	Desma Ridley		
	Signature of a member or authorized representative of a member  DeAnna Ridley		
	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00