## L13000099493

(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:				
. JUL 3 1 2013				
A. LUNT				

Office Use Only



700249777647

07/31/13--01005--003 \*\*150.00

RECEIVED

13 JUL 31 AH 9: 41

13 JUL 31 AH 9: 41

13 JUL 31 AN 9: 49
SECRETATION OF STATE
ANTIANASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: C&M Construction and Lawncare L.L.C  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:
CARI M. WAYnick Name of Person
Firm/Company
191 Crestwood Drive
Address PCR 2
191 Crestwood Drive  Address  Crawfordviue FL 32327  City/State and Zip Code
E-mail address: (to be used for future annual report notification)  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CARI M Waynick at (850) 251-5036  Name of Person Area Code & Daytime Telephone Number
•
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  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

C&M Constru	ction AND LAWNCARE L.L	. C
( <u>Name of the Limited Lis</u> (A Flo	ction and Lawncare L.L.  ability Company as it now appears on our records.)  orida Limited Liability Company)	
The Articles of Organization for this Limited Liabi		and assigned JUL 3
This amendment is submitted to amend the followi	ing:	SSET OF E
A. If amending name, enter the new name of th	e limited liability company here:	SEE FLORIDA
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the designation	
Enter new principal offices address, if applicabl	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, enter e address here:	the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
	, Florida	7: 0.1
	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.

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 Title <u>Name</u> <u>Address</u> Type of Action CAR/ Waynick 10261 Syphon Drive MGRM Tallahassee, Fr 32305 Remove လ Remov ۻ Remove

D.	If am	mending any other information, enter change(s) here: (Attach	additional sheets, if necessary.)
	-		
Dat	ed	7 / 31 , 2013 .	
		Carl Wyner	
		Signature of a member or authorized repres	

Page 3 of 3

Filing Fee: \$25.00

13 JUL 31 AM 9: 45