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(Re	questor's Name)	
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COVER LETTER

TO: Registration S Division of Co			
ECO LAW SUBJECT:	/N, LLC		
SOBJECT:	Name of Limit	led Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspondent	ondence concerning this matter t	o the following:	
	Courtney Violette		
		Name of Person	
		Firm/Company	
	4327 S. Highway 27 PMB 4	110	
		Address	
	Clermont, FL 34711		
	violette.courtney@gmail.con	City/State and Zip Code	
		be used for future annual report notif	ication)
For further information of	concerning this matter, please cal	l:	
Courtney Violette		386 931-3520 at ()	: Telephone Number
Name o	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 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)

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

Eco Lawn LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on <u>07/16/2013</u>	and assigned
Florida document number L13000100689		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Eco Lawn and Property Maintenance, LLC		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6010 Cook Road	
(Principal office address MUST BE A STREET ADDRESS)	Clermont, FL 34714	<u></u>
Enter new mailing address, if applicable:	4327 S. Hwy 27, PMB 410	
(Mailing address MAY BE A POST OFFICE BOX)	Clermont, FL 34711	<u> </u>
		- CO
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		enter the name of the nev
Name of New Registered Agent: Courtney Vio	lette	
New Registered Office Address: 6000 Cook Ro		
	Enter Florida street address	
Clermont	, Flori	
	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	James A. Stokes	6010 Cook Road	
		Clermont, FL 34714	■ Remove
			Change
MGRM	William T. Barber	1115 Jodi Ridge Court	
		Kissimmee, FL 34747	Remove
			☐ Change
MGR	Courtney Violette	6000 Cook Road	■ Add
		Clermont, FL 34714	□ Remove
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antivo	date, if other than the date of filing: (op	tional)
1 effecti <u>te:</u> If t	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after date inserted in this block does not meet the applicable statutory filing requirements, the seffective date on the Department of State's records.	tional) ter filing.) Pursuant to 605,020 his date will not be listed a
	I specifies a delayed effective date, but not an effective time, at 12:01 th day after the record is filed.	a.m. on the earlier o
ed	12/29/16	
	Signature of a member or authorized representative of a member	
	Courtey S. Viscette Typed or printed name of signee	

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Filing Fee: \$25.00