L13000138507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

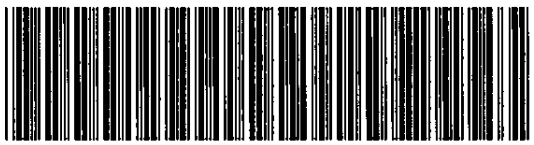
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000288904240

08/18/16--01027--008 **35.00

FILED
16 OCT 17 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 19 2016

Y SULKER

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2016

JARROD ROUSE
2888 W LAKE MARY BLVD
LAKE MARY, FL 32746

SUBJECT: HARDSCAPERS OF CENTRAL FLORIDA, LLC
Ref. Number: L13000138507

RECEIVED
2016 OCT 17 PM 4:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for HARDSCAPERS OF CENTRAL FLORIDA, LLC and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 516A00017659

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: HARDSCAPERS OF CENTRAL FLORIDA 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:

JARROD ROUSE
Name of Person

HARDSCAPERS OF CENTRAL FLORIDA LLC
Firm/Company

2888 W. LAKE MARY BLVD, ~~LAKE MARY~~
Address

LAKE MARY, FL 32746
City/State and Zip Code

jrouse22@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JARROD at (407) 575 2551
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

_____
(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 10/01/2013 and assigned Florida document number L13000138507.

This amendment is submitted to amend the following:

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

_____
The new name must be distinguishable and contain 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)

2888 W. LAKE MARY BLVD.
LAKE MARY, FL 32746

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: STEVEN ECHEVERRY

New Registered Office Address: 2888 W. LAKE MARY BLVD
Enter Florida street address

LAKE MARY, Florida 32746
City *Zip Code*

FILED
2013 OCT 17 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Title	Name	Address	Type of Action
MGRM	MAROTTA, BRIAN J.	9985 SWEETLEAF ST.	☐ Add
		ORLANDO, FL 32807	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

FILED
17 OCT 17 PM 1:
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

THE ADDRESS CHANGE SHOULD BE TO
2588 W. LAKE MARY BLVD.
LAKE MARY, FL 32746
PRINCIPAL AND MAILING

ADDRESS CHANGE FOR MGRM JARROD ROWSE, PERSONAL
542 THAMES CIRCLE
LONGWOOD, FL 32750

BRIAN MAROTTA SHOULD NO LONGER BE
LISTED ANYWHERE ON THE COMPANY PROFILE

THE ORIGINAL PAYMENT OF $35.00 SHOULD BE
APPLIED TO THIS BILL

FILED
16 OCT 17 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 9-29-16 **(optional)**
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated _____, _____.

_____
Signature of a member or authorized representative of a member

JARROD ROWSE
Typed or printed name of signee

Filing Fee: $25.00