

L13006154393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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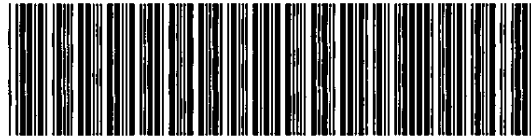
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **ALL AROUND LANDSCAPING 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:

WILLIE BASS

Name of Person

BASS HOME TAX SERVICE LLC

Firm/Company

18101ba@ATT.NET

Address

MIAMI GARDENS , FL 33169

City/State and Zip Code

18101ba@ATT.NET

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

For further information concerning this matter, please call:

WILLIE BASS

Name of Person

at **786 6573912**

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: ALL AROUND LANDSCAPING, LLC
2. (a) Principal office address of limited liability company: 3520 NW 197 St
(Note: **MUST BE STREET ADDRESS**) MIAMI GARDENS FL 33056
- (b) Mailing address of limited liability company: 3520 NW 197 St
(Note: **MAY BE POST OFFICE BOX**) MIAMI GARDENS FL 33056

- 11-01-2013
3. Date of filing/registration in Florida
- 600253456736
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Michael HARVARD JR.

Registered Office Address:

3520 N.W. 197th St.
MIAMI GARDENS FL 33056

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

BRENDA POWELL

NEW Registered Office Address:

3520 NW 197 St

(**MUST BE FLORIDA STREET ADDRESS**)

MIAMI GARDENS FL 33056

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Willie Bass
Printed or typed name of signer

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.

Signature of Registered Agent

Brenda Powell

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00