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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : WARD, DAMON & POSNER, P.A.
Account Number : 072262000447
Phone : (561) 842-3000
Fax Number : (561) 842-3626

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****
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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BMI SEAL COAT PAVING AND STRIPING, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 NOV -7 PM 12:07

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Nov. 7. 2014 10:44AM

File No. 10652-P, 2014110

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BMI Seal Coat Paving and Stripping, 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:

Cathleen D. Ward, Esq.

Name of Person

Ward Damon, Law Offices

Firm/Company

4420 Beacon Circle

Address

West Palm Beach/FL 33407

City/State and Zip Code

cward@warddamon.com

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

For further information concerning this matter, please call:

Cathleen D. Ward, Esq.

Name of Person

at (

561 8423000

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 &
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(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

Nov. 7. 2014 10:44AM

File No. 10652 P. 31112

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BMI Seal Coat Paving and Stripping, LLC

(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 February 13, 2014 and assigned Florida document number L14000025666

This amendment is submitted to amend the following:

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

BMI Better Mower, LLC

The new name must be distinguishable and end with 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)

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:

New Registered Office Address:

Enter Florida street address

City

Florida

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

44-14 No. 10652 (P. 41913)

MGR = Manager
AMBR = Authorized Member

[illegible]

14 NOV - 7 PM 07
SECRETARY OF STATE
ALLAHABADE, FLORIDA

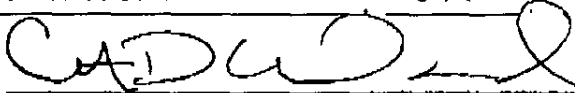
Nov. 7. 2014 10:44AM

File No. 10552 P. 51913

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

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated November 7 2014



Signature of a member or authorized representative of a member

Cathleen D. Ward, Esq.

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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