

L14000048509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

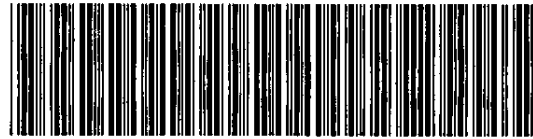
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700261802687

07/02/14--01018--006 **60.00

FILED
14 JUL -2 AM 11:05
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

J Shivers JUL 02 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mr. Green's Lawn Care and Tree Services 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:

Micah Miller
Name of Person

Mr. Green's lawn care and tree services
Firm/Company

4513 Pipeline rd. Lot 15
Address

Panama City fl. 32404
City/State and Zip Code

mr.greenllc.mm@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rachel Miller at (850) 890-4156
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**

MR. GREEN'S LAWN CARE AND TREE SERVICES 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 March 24, 2014 and assigned Florida document number L14000048509.

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 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:

Bachel Miller

New Registered Office Address:

4513 pipeline rd. (Lot 15)
Enter Florida street address

Panama City
City

Florida

32404
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.

Bachel E. Miller

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Rachel Miller		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	Micah Miller	4513 Pipeline rd. (Lot 15)	<input checked="" type="checkbox"/> Add
		Panama City, FL 32404	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

14 JUN - 2 11:05
FLORIDA

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

Micah J. Miller is the owner of
the buissness..

Rachel E. Miller is the office manager.
handles clerical work, accounting, advertisement, ect.

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 June 6, 2014.

<u>Rachel Miller</u>	/	<u>Micah J. Miller</u>
Signature of a member or authorized representative of a member		
<u>Rachel Miller</u>	/	<u>Micah J. Miller</u>
Typed or printed name of signee		
"Office Manager"		"owner"

FILED
14 JUL -2 4:11:05
TALLAHASSEE
FLORIDA