L14000052313

(Re	equestor's Name)	
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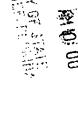
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2014

F. LORRAINE JAHN 3409 W LEMON STREET TAMPA, FL 33609

SUBJECT: PIPELINE LAND SERVICES, LLC

Ref. Number: L14000052313

We have received your document for PIPELINE LAND SERVICES, 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.

Tammi Cline Regulatory Specialist II

Letter Number: 414A00024624

14 DEC 10 AM 10: 00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Peline LAnd Services, LKC 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:
7. Lorraine JAHN
Law Offices of F. L. Jahn, P.A. 3409 W. Lemon Street Tampa, FL 33609 Address
City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code
For further information concerning this matter, please call:
7. Lorratine JAHN at (813) 5-14-6363 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$ 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

<u> </u>	<u> </u>
Name of the Limited Liability Compan	LAND Services U
(A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L14000533</u>	were filed on $3/31/14$ and assigned $3/31/14$
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and end with the words "Limited Liabil	
Enter new principal offices address, if applicable:	The second of th
(Principal office address MUST BE A STREET ADDRESS)	3409 W. Lemon S TAMPA, 71 33609
Enter new mailing address, if applicable:	Α
(Mailing address MAY BE A POST OFFICE BOX)	Sæne as alieve
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address: 340	Enter Florida street address
— TA	City Florida 336 09

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 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 **Address** Title Name ☐ Remove 33609 ☐ Remove □ Add □ Remove ☐ Remove □ Add _□ Remove

If amending any other information, enter change(s) here: (Atta	ich additional sheets, tj necessary.)
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date the date this document is filed by the Florida Department of State) Dated	and cannot be more than 90 days after
Signature of a meniber or authorized re	/ /
Typed or printed pame	

Page 3 of 3

Filing Fee: \$25.00