

L14000100534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

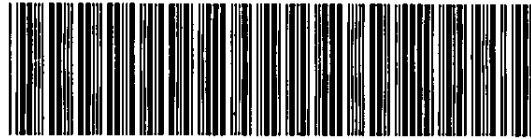
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Am

Office Use Only



000261318130

000261318130
08/15/14--01019--009 **25.00

FILED

14 SEP -9 PM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W14-51039

Burch SEP 10 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ST JOHNS LANDSCAPE, 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:

UNDINE C. GEORGE

Name of Person

ANASTASIA LAW PL

Firm/Company

107 A 11TH ST

Address

ST AUGUSTINE FL 32080

City/State and Zip Code

UNDINE@ANASTASIALAW.NET

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

For further information concerning this matter, please call:

UNDINE GEORGE

Name of Person

904 236-6243

at (Area Code)

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 20, 2014

UNDINE C. GEORGE
107 A 11TH ST
ST AUGUSTINE, FL 32080

SUBJECT: ST JOHNS LANDSCAPE, LLC
Ref. Number: W14000051039

We have received your document for ST JOHNS LANDSCAPE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete page 1 of the Articles of Amendment.

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.

Tim Burch
Regulatory Specialist II

Letter Number: 914A00017899

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

ST JOHNS LANDSCAPE, 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 06/23/2014 and assigned
Florida document number L14000100534.

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)

7000 US Hwy 1 N, #201

St. Augustine, FL 32095

FILED
14 SEP -9 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Undine C. George

New Registered Office Address:

107 A 11th Street

Enter Florida street address

St. Augustine, Florida 32080

City

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.

Undine C. George
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>
AMBR	Nigel C. Brown	7000 US Hwy 1 N #201	<input checked="" type="checkbox"/> Add
		St. Augustine, FL 32095	<input type="checkbox"/> Remove
AMBR	Anthony Brown	7000 US Hwy 1 N #201	<input checked="" type="checkbox"/> Add
		St. Augustine FL 32095	<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

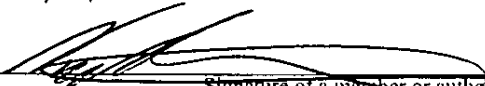
FILED
 14 SEP - 9 PREL:LS
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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 8/11/14



Signature of a member or authorized representative of a member

NIGEL C. BROWN

Typed or printed name of signee

FILED
14 SEP -9 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA