L/4000182139

(Reque	stor's Name)	
(Addres	ss)	
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(City/St	ate/Zip/Phone #)	
(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) (Business Entity Name) (Document Number) (Certified Copies Certificates of Status Special Instructions to Filing Officer:		
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K.SALY EXAMINER NOV 19 2015

COVER LETTER

	Registration Se Division of Cor		4			
CUD IEC		Outdoor Services LLC				
Name of Limited Liability Company						
The enclo	sed Articles of .	Amendment and fee(s) are sub-	mitted for filing.			
Please ret	um all correspo	ndence concerning this matter	to the following:			
		Harley Pennington				
Name of Person						
		Go Green Outdoor Service	s			
			Firm/Company			
		32205 County Road 437				
			Address			
		Sorrento, FL 32776				
			City/State and Zip Code	g. g. g: Person mpany d Zip Code ture annual report notification) 7 575-3436 a Code Daytime Telephone Number Filing Fee & God Copy Certificate of Status & Certified Copy al copy is enclosed) Certified Copy		
		Harley@gogreenos.com				
		E-mail address: (to be used for future annual report notifi-	cation)		
For furthe	r information c	oncerning this matter, please ca	all:			
Harley Po	ennington		407 575-3436 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed	is a check for th	e following amount:				
\$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &		

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

FILED
2015 NOV 16 AM 11: 09
FALLAHASSEE. FLORID:

Go Green Outdoor 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 [1.14000182139] 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 contain the words "Limited Liability Company," the designation "LLC" or the abbrecate 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]	-
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevance of the new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrument of the new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	reviation "L.L.C."
Enter new mailing address, if applicable:	
B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here:	he name of the nev
Name of New Registered Agent: Harley Pennington	
New Registered Office Address: 32205 County Road 437 Enter Florida street address Sociento, Florida 3	
Sociento, Florida 3	2776 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.

Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Christina L. Gore	32205 County Road 437	
		Sorrento, FL 32776	■ Remove
			Change
MGR	Harley Pennington	32205 County Road 437	Add
		Sorrento, FL 32776	□ Remove
			□ Change
			Add
			Remove
			Add Add Remove
			Change
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effective date te: If the date	if other than the is listed, the date me inserted in this letive date on the	ust be specific an block does not	d cannot be prio meet the appli	cable statutory	or more than 90 filing requirem	(optiona days after filir ents, this da	g.) Pursuant to 60	5.020 ted a
	cifies a delaye by after the re			ot an effecti	ve time, at 1	12:01 a.m	. on the earl	ier d
ed Nov	jember (L	9 M	, <u>ZOIS</u>	<u>.</u>				
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Filing Fee: \$25.00