L14000195586

(Requestor's Name)	
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(City/State/Zip/Phone #)	
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PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	
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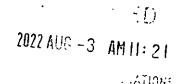


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2022 AUG -3 AM 8: 56
SECHETARY OF STATE
TALLAHASSEE, FI





July 21, 2022

ULLI STEINER TAX PROFESSIONAL SERVICES, LLC 1105 W MAPLE AVENUE GENEVA, AL 36340

SUBJECT: WHITE'S YARD SERVICE, LLC

Ref Number: W22000095586

We have received your document for WHITE'S YARD SERVICE, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 922A00016344

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COVER LETTER

	Registration Se Division of Cor			
(24.195.442.6		ALER, LLC		
SUBJEC	CT:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Ulli Steiner		
			Name of Person	
		Tax Professional Services,	LLC	
			Firm/Company	
		1105 W Maple Ave		
			Address	
		Geneva, AL, 36340		
			City/State and Zip Code	
		ulli@taxprollc.com		
		E-mail address: (to be used for future annua	1 report notification)
For furth	er information o	concerning this matter, please c	all:	
Ulli Stei	ner		334 65	34-6398
	Name o	f Person	Area Code	Daytime Telephone Number
Enclosed	l is a check for t	he following amount:		
■ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is et	Certificate of Status &
	Mailing Address Registration	Section	Regist	address: ration Section
	Division of C P.O. Box 632	•		on of Corporations entre of Tallahassee
	Tallahassee,			N. Monroe Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 AUG -3 AM 8: 56

EASY SCALER, LLC

SECKETARY OF STATE TALLAHASSEE, FL

(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 L	iability Company	were filed o	on <u>12/29/2014</u>	and assigned
Florida document number L14000195586	<u> </u>			
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	lity compa	ny here:	
WHITE'S YARD SERVICE, LLC				
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company.	the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:	N/A		
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	BOX)			
				
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	•••	address on	our records, <u>enter t</u>	he name of the new registered
New Registered Office Address:	N/A			
New Registered Office Address.		Ent	er Florida street address	
			. Flor	rida
		City		Zip Code
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as registeing filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as p registered office	performan provided fo	ce of my duties, and r in Chapter 605, F	l I am familiar with and ".S. Or, if this document is
	If Char	iging Register	red Agent, <u>Signature of</u>	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>	<u>Name</u>	Address	Type of Action
N/A	N/A	N/A	□ Add
			□Remove
			□Change
			□ Add
			□Remove
			Change
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reffective da	e, if other than the dat	specific and cannot be prior to da	nte of filing or more than 90 d	_ (optional) ays after filing.) Pursuant to	o 605,020
	Tective date on the Depart	does not meet the applicable tment of State's records.	statutory ming requireme	ents, this date will not be	e usted a
cord specif s filed.	ies a delayed effective dat	te, but not an effective time,	at 12:01 a.m. on the earlie	er of: (b) The 90th day	after the
ed	May 5	2022			
1	May 5	Aite			_
	O Sign	ature of a member or authorize	a representative of a member	ſ	