45000084616

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COVER LETTER

Division of Corporations TOP 2 BOTTOM EXTERIOR CLEANING, LLC SUBJECT: 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: David Conte Name of Person Firm/Company 4600 SUMMERLIN RD #416 Address FT MYERS, FL 33919 City/State and Zip Code beachfixer@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 239 246 2597 David B Conte Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. **■** \$25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L. 15000084616	were filed on and assigned and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
John Conte Lawn Service, LLC			
The new name must be distinguishable and contain the words "Limited Liability Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "LLC" or the abbreviation "L.L.C." 4600 SUMMERLIN RD STE 416		
	FT MYERS, FLORIDA 33919		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	4600 SUMERLIN RD STE 416		
	FT MYERS, FLORIDA 33919		
 If amending the registered agent and/or registered or registered agent and/or the new registered office address her 	-		
Name of New Registered Agent:			

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 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>	<u>Address</u>	Type of Action
AMBR	JOHN A CONTE	4600 SUMMERLIN RD STE 416 FT MYERS, FL 33919	■ Add
			□ Remove
			Change
AMBR	DAVID B CONTE		
		5871 ESTERO BLVD FT MYERS BEACH, FL 33931	≅ Remove
		 	Change
MGR	DAVID B CONTE	4600 SUMMERLIN RD STE 416 FT MYERS, FL 33919	
			☐ Remove
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			□ Remove
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Effective date, if other than the (If an effective date is listed, the date mu	st be specific and cannot be p	prior to date of filing of	r more than 90 days after	filing.) Pursuant to 605.0	0207 (3
Note: If the date inserted in this b document's effective date on the D			ing requirements, this	s date will not be fister	นสรนท
			- 111-10-01		e.
the record specifies a delaye) The 90th day after the rec		not an effectiv	e ume, at 12:01 a	a.m. on the earlie	er O T:
DECEMBER 7	2018				
Dated	·				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00