

**L15000123201**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

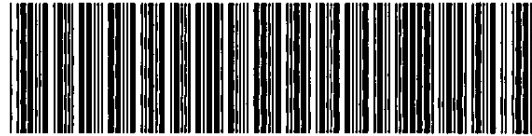
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17 MAR 22 PM 1:35  
CLERK OF SUPERIOR COURT

MAR 23 2017  
J. HARRIS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** M E E LAWN SERVICES LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMERSON SILVA  
Name of Person

M E E LAWN SERVICES LLC  
Firm/Company

1530 RIVER DR Apt K 206  
Address

TAMPA FL 33403  
City/State and Zip Code

EMERRSON@HOTMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EMERSON SILVA at ( 813 ) 484 9521  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 17, 2017

EMERSON SILVA  
1530 RIVER DR APT K206  
TAMPA, FL 33603

SUBJECT: M & E. LAWN SERVICES INC  
Ref. Number: L15000123201

We have received your document for M & E. LAWN SERVICES INC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 317A00003227

RECEIVED  
2017 MAR 22 AM 11:35  
TALLAHASSEE, FLORIDA

17 MAR 22 PM 1:35

FILED  
SECRETARY OF STATE  
CORPORATION INFORMATION



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 25, 2017

MAKI IPPOLITO  
10244 GRANT CREEK DR  
TAMPA, FL 33647

SUBJECT: M & E. LAWN SERVICES INC  
Ref. Number: L15000123201

RECEIVED  
2017 FEB 13 PM 3:33  
TALLAHASSEE, FLORIDA

We have received your document for M & E. LAWN SERVICES INC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 817A00001534

17 MAR 22 PM 1:35

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: M & E LAWN SERVICES LLC

2. (a) 10244 Grant Creek Dr Tampa FL 33647 (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

10244 Grant Creek Dr  
Tampa FL 33647

3. 2-7-2017  
Date of filing/registration in Florida

4. L15 000123201  
Document number

5. (a) MAKI IPPOLITO  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

10244 GRANT CREEK D  
Tampa, FL 33647

(b) EMERSON SILVA  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1530 RIVER DR Apt K206  
**NEW Registered Office Address:**

Tampa FL 33603

\_\_\_\_\_, FL \_\_\_\_\_

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

EMERSON SILVA  
Printed or typed name of signee

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.

[Signature]  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
**FILING FEE: \$25.00**

FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONS  
17 MAR 22 PM 1:35