Florida Department of State

Il visit of Corporations

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF "

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|  | <b>J&amp;E</b> H/  | AULING LLC                                  |   |   |
|--|--|---|---|---|
|  | (Name of the Limited Liability Co<br>(A Florida Lim  | mpany as it now appeated Liebility Company) | ars on our records.)                          | <del></del>                                 |
| The Articles of Organization                                 | for this Limited Liability Comp  |   | 00/20/2015                                    | and assigned                                |
| Florida document number                                      |  | •   |   |   |
| This amendment is submitted                                  |  |   |   |   |
| A. If amending name, enter                                   | the new name of the limited  | liability company t                         | <u>iere</u> ;                                 |   |
| SOUTHERN TASK TREE   | SERVICE LLC  |   |   |   |
| The new name must be distinguished                           | ble and contain the words "Limited I   | Liability Company," the                     | designation "LLC" or the                      | abbreviation "L.L.C."                       |
| Enter new principal offices                                  | address, if applicable:  |   |   | <u> </u>                                    |
| (Principal office address MC                                 | ST BE A STREET ADDRES  |   |   |   |
|  |  |   |   |   |
|  |  |   |   | COST I                                      |
| Enter new mailing address,                                   | if applicable:   |   | · · · · · · · · · · · · · · · · · · ·         |   |
| (Mailing address MAY BE A                                    | - •  |   |   |   |
| Disautor saucessiving were                                   |  |   |   |   |
|  |  | <del></del>                                 |   | manual of                                   |
| B. If amending the regis                                     | iered agent and/or registere   | d office address o                          | on our records, ente                          | r the name of the new                       |
| registered agent and/or the                                  | new registered office address  | here:                                       |   |   |
|  |  |   |   |   |
| Name of New Regi   | tered Agent:   | <del></del>                                 |   |   |
| New Registered Of  | ice Address:   |   |   |   |
|  |  | Enter Fl                                    | lorida street address                         |   |
|  |  |   | , Florida _                                   | Zip Code                                    |
|  | <del></del>  | City  |   | Zip Code                                    |
| New Registered Agent's Sign:                                 | ture, if changing Registered As  | ent:  |   |   |
| provisions of all statutes re<br>accept the obligations of m | ment as registered agent and<br>lative to the proper and comp<br>y position as registered agent<br>a change in the registered of<br>in writing of this change. | elete performance of<br>as provided for in  | of my duties, and I am<br>Chapter 605, F.S. O | familiar with and<br>r, if this document is |
|  |  |   |   |   |
|  | :<br>!   | Changing Registered                         | Agent, Signature of New 1                     | Registered Agent                            |
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| i <b>/</b>   | JASON HARRIS   |

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