L15000176928

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COVER LETTER

Div	ision of Corp	orations						
SUBJECT:	Green2 Serv	vices LLC						
SUBSECT.		Name of Lim	ited Liability Company					
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.					
Please return	all correspor	ndence concerning this matter	to the following:					
		Taylor J Campbell						
			Name of Person					
			Firm/Company					
		12157 West Linebaugh Av	ve,, Suite 231					
	Address							
		Tampa, Florida 33626						
			City/State and Zip Code					
		taylor@green2services.com						
		E-mail address: (to be used for future annual report notifi	cation)				
For further in	formation co	ncerning this matter, please ca	all:					
Taylor J Car			813 951-3704 at ()	Telephone Number				
	Name of	Person	Area Code Daytime	Telephone Number				
Enclosed is a	check for the	e following amount:						
□ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (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

Green2 Services LLC			
(<u>Name of the Limited Liability C</u> (A Florida Li	Company as it now appears on our rec mited Liability Company)	cords.)	_
The Articles of Organization for this Limited Liability Com Florida document number L15000176928			assigned
This amendment is submitted to amend the following:			
nter new mailing address, if applicable:			
The new name must be distinguishable and contain the words "Limited	l Liability Company," the designation "l	LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>		
		24.	
Enter new mailing address, if applicable:		<u> </u>	<u>5</u>
(Mailing address MAY BE A POST OFFICE BOX)		20 m	
		<u> </u>	0 ("-1
B. If amending the registered agent and/or register	red office address on our reco	T.	ne of the ne
registered agent and/or the new registered office addres	<u>s here</u> :	9 87	0
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street ade	ldwaa	
	City	, Florida Zip Co	xde

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>	Address	Type of Action
MGR	Keith C Campbell	10310 Saville Rowe Lane, Tampa FL 33626	Add
			☐ Remove
			Change
MGR	Linda P Campbell	10310 Saville Rowe Lane, Tampa FL 33626	Add
			□ Remove
			Change
 			Add
			Remove
			Change
			DE ARIO
			□ Remove :
			∴ Change
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if other th	an the date	of filing:		- data aCCI:	(o	ptional)		\
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