

L15000180324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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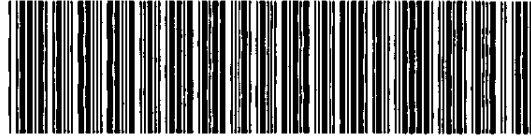
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Greater Is He Landscaping and More "LLC"  
Name of Limited Liability Company

The enclosed Articles of Amendment and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian O Williams  
Name of Person  
Greater Is He Pest Control Services "LLC"  
Firm/Company  
1064 Buccancer Blvd.  
Address  
Green Cove Springs, FL 32043  
City/State and Zip Code  
TAURUS76510@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Williams at ( 904 ) 805-2009  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing 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:**  
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

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

GREATER IS HE LANDSCAPING & MORE "LLC"

(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 Liability Company were filed on OCT 23, 2015 and assigned Florida document number L1500018324.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

GREATER IS HE PEST CONTROL SERVICES "LLC"

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

1064 Buccancer Blvd

**(Principal office address MUST BE A STREET ADDRESS)**

Green Cove Springs

Fl. 32043

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_

*City*

*Zip Code*

**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>	<u>Type of Action</u>
MGR	Eugene Howard	1064 Buccaneer Blvd	<input type="checkbox"/> Add
		Green Cove Springs	<input checked="" type="checkbox"/> Remove
		Fl. 32043	<input type="checkbox"/> Change
AMBR	Christopher C. Gross	1064 Buccancer Blvd	<input checked="" type="checkbox"/> Add
		Green Cove Springs	<input type="checkbox"/> Remove
		Fla. 32043	<input type="checkbox"/> Change
AMBR	Brian O Williams Jr	1064 Buccaneer Blvd	<input checked="" type="checkbox"/> Add
		Green Cove Springs	<input type="checkbox"/> Remove
		32043	<input type="checkbox"/> Change
AP	Dorothy L Williams	1064 Buccaneer Blvd	<input type="checkbox"/> Add
		Green Cove Springs	<input checked="" type="checkbox"/> Remove
		Fl. 32043	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
		<input type="checkbox"/> Add	
		<input type="checkbox"/> Remove	
		<input type="checkbox"/> Change	

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