

U5000185121

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(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA
16 MAY 18 AM 12:15

JUN 03 2016

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2016 MAY 31 PM 2:46

May 19, 2016

STEVEN TAYLOR
805 W RICH AVENUE
DELAND, FL 32720

SUBJECT: TAYLOR KORPI LAWN AND TRACTOR SERVICE LLC
Ref. Number: L15000185121

We have received your document for TAYLOR KORPI LAWN AND TRACTOR SERVICE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 116A00010616

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TALLAHASSEE, FLORIDA
16 MAY 18 AM 12:15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TAYLOR KORPI LAWN AND TRACTOR SERVICE LLC
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:

STEVEN TAYLOR

Name of Person

TAYLOR KORPI LAWN & TRACTOR SERVICE LLC

Firm/Company

805 W. RICH AVE.

Address

DELAND, FL 32720

City/State and Zip Code

TAYLORKORPI.LTS@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL 32301
16 MAY 18 AM 12:15

For further information concerning this matter, please call:

STEVE TAYLOR

Name of Person

at (407) 496-8514

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

TAYLOR KORPI LAWN AND TRACTOR SERVICE 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 10/28/2015 and assigned Florida document number L15000185121.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

242 4TH ST.

OSTEEN, FL 32764

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

805 W. RICH AVE.

DELAND, FL 32720

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:

805 W. RICH AVE.

Enter Florida street address

DELAND

Florida

32720

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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TALLAHASSEE
FLORIDA
MAY 18 11:12:55

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA
16 MAY 18 AM 12:15

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

MAY 27TH ~~2016~~, 2016

Signature of a member or authorized representative of a member

STEVEN P. TAYLOR

Typed or printed name of signee