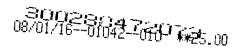
# U15000 197279

_
_

Office Use Only



300288472073





AUG 0 2 2016

Y SULKER



Axe To Grind Tree Service, LLC.
5108 Eisenhower Blvd. Tampa, FL 33634
Ph. (727) 415-0321 / (727) 485-5684
www.axetogrindtreeservice.com / contact@axetogrindtreeservice.com

July 28, 2016

Ref: Amend the Articles of Organization of AXE TO GRIND TREE SERVICE, LLC

Attn: Registration Section Division of Corporations

Enclosed is the updated correct ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF AXE TO GRIND TREE SERVICE, LLC. Document Number L15000193239, FEI/EIN Number 47-5595143. Please attach this correspondence to the Amended Articles and not that any future ... Amendments can only be submitted by the MGR/Principal, Sloan Cox. No other Agent or representative is authorized to make changes without my sole written permission. If you have any questions or concerns please contact me directly at 727-415-0321, email: <a href="mailto:sloancox@gmail.com">sloancox@gmail.com</a> or via US mail at PO BOX 21192, Tampa FL 33622.

Thank you.

Sloan Cox

## **COVER LETTER**

Division of Cor	porations						
CHDIECT.	AXE TO GRIN	ID TREE SERVICE, LLC					
SUBJECT:	Name of Lim	ited Liability Company	<del></del>				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspo	ondence concerning this matter	to the following:					
		Sloan Cox					
		Name of Person					
AXE TO GRIND TREE SERVICE, LLC							
		Firm/Company					
		PO BOX 21192					
		Address					
		Tampa FL 33622					
		City/State and Zip Code					
	E mail addition of	sloancox@gmail.com to be used for future annual report notif	<del></del>				
For further information c	oncerning this matter, please co		ication)				
Sloan Cox		727 415-0321					
Name of Person		at () Area Code Daytime	Telephone Number				
Enclosed is a check for the	ne 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:

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

# AXE TO GRIND TREE 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 and assigned Florida document number $_{-}^{-}$ $^{L15000193239}$ 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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

#### 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.

City

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	Michelle Taylor	13268 Drayton Dr.	Add
		Spring Hill, FL 34609	Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			□ Remove
			Change  6 Add
			CO A
			Remove
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change

											_
						·					_
								m.,			_
			,			. ,					
											_
											_
								•			
-									<del></del>		_
		<del> </del>									_
<u> </u>			***				•				
						<del></del>		<del></del>			_
								: i		16	
`								:	2 (*) 2 (*)	AUG	
	~~~			<del></del>						1	—. ,
								<u>برا</u> برا	; <u> </u>		,, 
								.77		) !!!d	-
ective date	, if other than	the date of f	iling:				(o	otional):		ļ: ļ	*
te: If the da	e is listed, the date the inserted in thi ective date on the	s block does r	iot meet th	e applicab	le statutory	filing requ	irements,	this date v	vill n	ot be li	sted as
	(C	yed effectiv		but not a	an effect	ive time,	at 12:0	1 a.m. c	on th	ie ear	lier o
	ecifies a dela	record is in									
The 90th d		A	201	6	.  }						
	lay after the	A	l.,_	12	red represen	tative of a n	ıember				

Page 3 of 3

Filing Fee: \$25.00