L1600035010

(Requ	uestor's Name) -	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Busi	ness Entity Na	me)
(Docu	ıment Number))
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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JUN 0 7 2016 S MASON

COVER LETTER

TO: Registration So Division of Cou	ection * *		
OLID FOOD	Lawn & Landscapes, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jessie Padilla		
		Name of Person	
	Debbie's Accounting Servi	ce Inc	
		Firm/Company	
	3575 Southside Blvd		
		Address	
	Jacksonville, Florida 3221	6	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	ication)
For further information c	concerning this matter, please ca	all:	
Jessie Padilla		904 733-4547 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability ((A Florida Li	Company as it now appointed Liability Company	ears on our records.)		
he Articles of Organization for this Limited Liability Conlorida document number L16000025010	npany were filed on <u>f</u>	2/5/2016 and assigned		
his amendment is submitted to amend the following:				
. If amending name, enter the new name of the limited	d liability company	here:		
I/A				
he new name must be distinguishable and contain the words "Limited	d Liability Company," the	e designation "LLC" or the abbreviation "L.L.C."		
nter new principal offices address, if applicable:	10846 Bahia	10846 Bahia Drive		
Principal office address MUST BE A STREET ADDRES	Jacksonville,	Jacksonville, Florida 32246		
nter new mailing address, if applicable:	10846 Bahia			
Mailing address MAY BE A POST OFFICE BOX)	Jacksonville,	Florida 32246		
. If amending the registered agent and/or register egistered agent and/or the new registered office address		on our records, enter the name of the		
Name of New Registered Agent: SAME				
New Registered Office Address: 10846 Ba	ahia Drive			
-	Enter F	Florida street address		
Jacksonv	rille	, Florida 32246 Zip Code		

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 &

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	Richard A. Harris	10846 Bahia Drive	
		Jacksonville, Florida 32246	□ Remove
		NEW ADDRESS	☐ Change
MGR	Deandre L. Davis	2132 Kusaie Drive	⊟ Add
		Jacksonville, Florida 32246	Remove
		NOW 10% OWNER	Change
			Add
			☐ Remove
			Change
			Add
			Remove
			□ Change
			Remove
			Ohange
			ORDING Add
		g ver	□ Change

	10014	<i>D</i> 11111	DRIVE			000
HANGE OF OW	NERSHIP NOW	50% OWNERSH	IP			
eandre L. Davis 2	2132 Kusaie Dr Ja	ax FL 32246				
OW 50% OWNE	RSHIP					
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If the date inserted	d in this block do		olicable statutory fi			
ord specifies a 90th day after			not an effectiv	e time, at 17	2:01 a.r	n. on the ea
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Filing Fee: \$25.00