1160000026595

(Re	equestor's Name)	
(Ad	Idress)	
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(Cit	ty/State/Zip/Phone	: #)
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SECRETARY OF STATE
SECRETARY OF STATE

D. SCOTT MAY 4 2017

COVER LETTER

TO: Registration Se Division of Cor				
NAME OF SUBJECT:	LLC MISSPELLED			
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:		
	JOSE CONTRERAS			
		Name of Person		
	MIGHTY MOWERS LLC	:		
	-	Firm/Company		
	2307 38TH AVE E			
		Address		
	BRADENTON, FL 34208			
•		City/State and Zip Code		
	blanca.lerma1@gmail.com			~~ 1
		to be used for future annual report notifi	cation)	ACR = A
For further information c	oncerning this matter, please ca	all:		
BLANCA LERMA		941 894-5211 at ()		器。四
Name o	f Person		Telephone Number	FILED NAT -3 NA IG 32 ECRETARY OF STATE ALLAMASSEF, FLORIDA
Enclosed is a check for the	ne following amount:			32
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee &. Certified Copy (additional copy is enclosed)	Certified (e of Status &
	ING ADDRESS:	STREET/COURIE	ER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIGHT MOWERS LLC		
(Name of the Limited (A	<u>Liability Company as it now appears on our records.)</u> I Florida Limited Liability Company)	
The Articles of Organization for this Limited Lial Florida document number L16000026595	bility Company were filed on 02/08/2016	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
MIGHTY MOWERS LLC		
he new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicat	ale.	
<u>Principal office address MUST BE A STREET</u>	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE Bo	OX)	
		758 7
B. If amending the registered agent and/or	registered office address on our records, ente	r the name of the n
registered agent and/or the new registered office		
		影響る所
Name of New Registered Agent:		四年 口
		E S 6
New Registered Office Address:		<u> </u>
	Enter Florida street address	37.
	, 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 = Ma $AMBR = Au$	nnager thorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			□ Remove
			□ Change
			Z SID ATT
			CRE J. Change G 32
			□ Remove
			Add
			Remove

_ Change

If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
	· · · · · · · · · · · · · · · · · · ·
	26
Effec	tive date, if other than the date of filing:
f an e	ffective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docu	ment's effective date on the Department of State's records.
	C C C C C C C C C C C C C C C C C C C
ne re Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies of e 90th day after the record is filed.
Dated	05/01,3017.
	(3) De como
	Signature of a member or authorized representative of a member
	BCANCA LERMA Typed or printed name of signce
	NCHWCA LERMA

Page 3 of 3

Filing Fee: \$25.00