

Office Use Only



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## **COVER LETTER**

	Registration Sec Division of Corp			
SUBJEC	EXQUISIT	E GROUNDS KEEPING LLC		
SUBJEC	, I ;	Name of Limite	d Liability Company	<del></del>
The encle	osed Articles of a	Amendment and fee(s) are submi	itted for filing.	
Please re	turn all correspoi	ndence concerning this matter to	the following:	
		STUART VIATOR		
			Name of Person	<del></del>
		EXQUISITE GROUNDS KI	EEPING LLC	
			Firm/Company	<del></del>
		2950 GREYSTONE DR		
			Address	
		PACE FL 32571		
			City/State and Zip Code	
		E-mail address: (to	be used for future annual report notifi	ication)
For furth	er information co	oncerning this matter, please call	:	
STUAR	Γ VIATOR		850 516-5886	
Name of Person			Area Code Daytime	Telephone Number
Enclosed	l is a check for th	e following amount:		
To: FA	00 Filing Fee ログロル か アメナビ	S30.00 Filing Fee & Surp 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



## **EXQUISITE GROUNDS KEEPING 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 C	Company were filed on _	AUGUST 8, 2016	and assigned
Florida document numberL16000147544	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company l	iere:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the	designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD)	RESS)		
	<del>-</del>		
Entor now mailing address if applicable.			
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add  Name of New Registered Agent:	stered office address o lress here:	n our records, <u>enter</u>	the name of the new
New Registered Office Address:			
	Enter Flo	orida street address	
		, Florida	Zip Code
Now Designated Agent's Signature if abouting Designation	City		Zip Code
New Registered Agent's Signature, if changing Registere	<del></del>		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered ageing filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance o gent as provided for in ed office address, I here	f my duties, and I am fo Chapter 605, F.S. Or,	amiliar with and if this document is

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	STUART VIATOR	2950 GREYSTONE DR	□ Add
			■ Remove
		PACE FL 32571	□ Change
			□ Remove
		<del>,,,</del>	Change
			Add
			☐ Remove
			Remove 20 Change
			Charinge  Add P  Charinge  Charinge  Charinge
			-11 Remove
		<del> </del>	Add
			□ Remove
			☐ Change
			□ Remove
			□ Change

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Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's recommendation.	(optional) e prior to date of filing or more than 90 days after tiling.) Pursuant to 605.0207 (3 applicable statutory filing requirements, this date will not be listed as the cords.
the record specifies a delayed effective date, bu ) The 90th day after the record is filed.	ut not an effective time, at 12:01 a.m. on the earlier of:
Dated Septemb 14 201	<u>17</u> .

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Typed or printed name of signee

Filing Fee: \$25.00