116000159454

questor's Name)	
dress)	
dress)	
y/State/Zip/Phone	e #)
☐ WAIT	MAIL
siness Entity Nan	ne)
cument Number)	
_ Certificates	s of Status
Filing Officer:	
	dress) dress) y/State/Zip/Phone WAIT siness Entity Nan cument Number) Certificates

Office Use Only



500320127885

10/36/18--81013--004 **80.00

COVER LETTER

Division of Corp	orations		
SUBJECT:	Egnity Tunf Name of Limi	Solutions LLC ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	JACKIE A	2. Moore	
	Carro 31.	5 Invilort S	olutions LLC
	5236 Com	Firm/Company MERCIAL WAY Address	SuiteD :
	Spring Hil	City/State and Zip Code 2EEn 365 FL. COV to be used for future annual report notific)
	E-mail address (1	to be used for future annual report notific	ration) - 1
For further information co	ncerning this matter, please ca	ill:	_
JACKE Name of	Person	at (<u>813</u>) <u>842</u> - Area Code Daytime	-219] Felephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy

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**

(A Florida Limited Liabili	ty Company)
The Articles of Organization for this Limited Liability Company were Florida document number <u>L16000159454</u> .	filed on $8-25-16$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of the new name must be distinguishable and contain the words "Limited Liability Co	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 5	pring Hill, FL 34600
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABOVE:
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent: New Registered Office Address: 5236 Co.	MOORE, JR. MERCIAL WAY, SuitE D Enter Florida street address ON TO SUITE D
New Registered Agent's Signature, if changing Registered Agent:	Hill , Florida 34606 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 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 **Title** <u>Name</u> Address Type of Action JACKIE R. MOORE 5236 Commercial Way, MADE Suite D Spring Hill FL 34606 Change 5236 Commercial Way, MAND Linette Moore MGR Spring Hill FL 34606 Change EASSANDRAY. GRIDER 5236 Commercial WAY MADE MGR ☐ Remove Spring Hill, FL 34606 Change NOAVAREOUS L. GRIDER 5236 COMMERCIAL WAY WAD M GR Spring Hill, FL 34606 - Change □ Add Remove ☐ Change Linete W. Marke □ Add Remove nogh Brider homive also □ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
WE RECEntly Applied for the name Green 365 Lawn: Pest
Solutions (L18000249330) not Knowing we could just
Admend our name. WE were advise by customer service
RED TERRI to File A dissolution of that name (GREEN 365)
and admend (Integrity). She advised us to put this
note in this section certifying that we would
not REVOKE the request Dissolution of the name
GREEN 365 LAWN PEST Solutions LLC. WE would
like to change Integrity Turf Solutions, LLC to
Green 365 Lawn · Pest Solutions, LLC and hereby
CERTIFY that there will not be anything filed
to request and/or revoke the Dissolution Filed
For Green 365 Lawn Pest Solutions, LLC (L1800024933
now or in the Future. PLEASE grant our reguest
so that we can use the name Green 365 Lawn & Pest
Solutions, LLC immediately per information given tous by customer service rep Tendis
by customer service REP TERRII
E. Effective date, if other than the date of filing: 10-20-18 (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.
David October 26th 2018
Dated October 26th 2018. Dackie R. Moore, Jr.
Signature of a member or authorized representative of a member
JACKIER MOORE JR.
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00