# MOCCOEDELLS

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FALL AHASSEF FLORIDA

S. WARREN 0CT 2 0 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: THEIBLEN'S ENVIRONMENTAL SERVERS LIC  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAVED THEERY  Name of Person
Firm/Company
4711 Long Lake Dr. Address
Ft. Myers FL 33 905  City/State and Zip Code  Th. Landa Landa Velos. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DAVID THERE Area Code Daytime Telephone Number  at (863) 585-5412  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \text{\$30.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\$\$ 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

_	THIELEN.			SERVICES	LLC	
	( <u>Name</u>	of the Limited Liability C (A Florida Lii	Company as it now as mited Liability Compa	ppears on our records.) any)		
		Limited Liability Com	opany were filed or	n 11/03/20	and ass	igned
This amendmer	nt is submitted to ame	end the following:				
A. If amendin	ig name, <u>enter the ne</u>	w name of the limited	d liability compar	ı <u>y here</u> :		
THO	IELEN EN	ITRONMENTAL	LLC			<del></del> -
The new name mu	ist be distinguishable and	contain the words "Limited	l Liability Company,"	the designation "LLC" of	or the abbreviation "L.	L.C."
Enter new pri	ncipal offices addres	s, if applicable:	4711	LONG LAI	Ke Drive	
•	•	A STREET ADDRES	$F_{+}$	Long LAI Myers, FC	33905	<del></del>
	illing address, if appl ess MAY BE A POST		4711 F+	Long Lake	- Drive	
		agent and/or register		ss on our records,	enter the name	of the new
<u>Name</u>	e of New Registered	Agent: Day	VID THI	ruen -	NIVY OF S	<u>m</u>
New	Registered Office Ad	dress: 471	Ente	er Florida street address	— <u> </u>	
			City City	<u>,</u> Flor	rida 3905 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 = Manager
AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AR	KRISTINA THIBURN	4711 long lake Dr Ft. Myers, FC 33905	🗅 Add
		Ft. Mus, FC 33905	□ Kemove
			☐ Change
Ar	CALES THIRLEN	4711 Long Lake Dr	Add
		4711 Long Lake Dr Ft. Myus, FL 33905	□ Remove
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