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· COVER LETTER

TO:	Registration Secti Division of Corpo			
SUBJE	ст:			ental Landscape Us
		Name of Limi	ited Liability Company	
The enc	losed Articles of An	Articles of Amendment and fee(s) are submitted for filing. Articles of Amendment and fee(s) are submitted for filing. All correspondence concerning this matter to the following: Ryan K Scott Name of Person Green Panther Lawiron mellet al Landsupe Firm/Company 933 E 2nd que Address New Smyrna Beach City/State and Zip Code Ryan Scott 495 P g.mail, com Gormation concerning this matter, please call: an R Scott Name of Person at 386, 413-4344 Name of Person Area Code Daytime Telephone Number Certificate of Status & Certificate Copy Certificate of Status & Certificate Copy		
Please re	eturn all corresponde	ence concerning this matter	Name of Limited Liability Company and fee(s) are submitted for filing. Trining this matter to the following: Ryan L Scott Name of Person Green Panther Equilization method Landstype Firm/Company 923 E 2nd ave Address New Smyrna Beach City/State and Zip Code Ryan Scott 485 P g mail, com E-mail address (to be used for future annual report notification) at matter, please call: T at 386 4/3-4344 Area Code Daytime Telephone Number mount: Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,	
		R	yan L Scott	· · · · · · · · · · · · · · · · · · ·
		923 <	E 2nd ave Address	***************************************
	_	New Ry	Smyrna Bec City/State and Zip Code an Scott 485 @	gmail, com
For furti	her information conc		Name of Limited Liability Company and fee(s) are submitted for filing. Agan L Scott Name of Person Green Panther Lagricon melot al Lands (green Panther Lagricon) Firm/Company 923 E 2nd ave Address New Smyrna Beach City/State and Zip Code Ryan Scott 485 P 3 mail, com E-mail address (to be used for future annual report notification) matter, please call: T at (386	
	_			3-4344
	Name of Pe	rson	Area Code Daytime	Telephone Number
Enclosed	d is a check for the f	ollowing amount:		
\$4. \$25.	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

	Ol	Environmental	
Green Pan	Her En	Environmental La	nd suge
(Name of the Limite	d Liability Compan A Florida Limited Li	v as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Lia Florida document number	bility Company v	were filed on	6 and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liabil	lity company here:	
The new name must be distinguishable and contain the wo Enter new principal offices address, if applica (Principal office address MUST BE A STREET)	ble:	923 2nd ave New Smyrner Ber 32	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	(OX)		
B. If amending the registered agent and/o registered agent and/or the new registered offi			r the name of the new
Name of New Registered Agent:			5
New Registered Office Address:		Enter Florida street address	
	New	Smyrna Beach, Florida_	39169

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
founda	Thomas Fareoff	705 N. Peninsula	
		Address 705 N. Peninsula New Sunyana Brock FL 34169	Remove
			Change
			D Add
			Remove
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			Add
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff	tive date, if other than the date of filing:
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
Dated	May 2, 2017.
	tuan two
	Signature of a member or authorized representative of a member
	Kyan R Scott

Page 3 of 3

Filing Fee: \$25.00