(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
		1/2

Office Use Only



900319373129

10/17/18--01028--028 **60.00

RECEIVED OCT 1 5 20:3

> J. 7 - 7 - 5 S PRAIRE.



October 24, 2018

GEORGE GREENE JR GREEN'S GRADING, LLC 907 MYSTERY CT DAVENPORT, FL 33837

SUBJECT: GREEN'S GRADING, LLC

Ref. Number: L17000095053

We have received your document for GREEN'S GRADING, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Letter Number: 518A00021925

Stacy Prather Regulatory Specialist III

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Green's Grading UC Name of Limited Liability Company
Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
George Greene Jr.
Greenl's Grading, UC
907 Mystery Ct.
Dovenport, Fl 33837 City/State and Zip Code
Greenes aradim & Vano Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
George Green Jr. at (863) 221-8665 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed)
kettad to resubmit with titles listed.

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

	Or	71 610
Greini's	Grading UC Liability Company as a new appears on our Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number <u>L17000950</u>	ility Company were filed on	and assigned 20
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	•	ecords, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
		, Florida
	City	, FIOFICIA

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>	<u>Name</u>	Address	Type of Action
MGR	James Reynolds	1654 Horshoe Creek)Zĺ Add
		Kd. Davenport, Fl	□ Remove
	· ·	33037	🗅 Change
MGR	George Greene sr.	907 Mystery Ct.	Add
	·	Davenport, FL 33437	□ Remove
			Change
AMBK	Evia Green	4544 CR 547N	□ Add
		Davenport, FL 33237	DARcmovc
			Change
			□ Add
			_□ Remove
			Change
			_□ Add
			_□ Remove
			Change
			Add
			_□ Remove
			_□ Change

				·		<u> </u>					_
				 							_
			 								
				***********					· ·-·		_
											_
			· ·						<u>.</u>		
											
				•							_
											_
				·							_
											_
_					· · · · · · · · · · · · · · · · · · ·	•			 .		_
										_	_
											_
		other than listed, the date				to date of fil	ing or more t	op han 90 days afi		suant to 6	05.020
		nserted in thi ve date on th					ry filing red	quirements, t	his date will	not be li	sted as
		fies a dela after the			e, but no	t an effe	ctive time	e, at 12:01	a.m. on	the ear	lier o
יכ אוו	JUI Gay	arter the	record is	med.							
ted	11	<u>2 V</u>		,	18					201	
		1-1	10 4	0					À	2019 JAN -	= 17
.cu			1000		rher or auth	orized remes	entative of a	member	<u> </u>	<u> </u>	, meren , mere
		Y	Signatu	re or a mer	tibel of wald						
		J	Signatu t	re of a mer	110	ed name of s		1 0.00	286 286	2 AH	: [

Page 3 of 3

Filing Fee: \$25.00