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COVER LETTER

TO: Registration Se Division of Co					
J&H TREI SUBJECT:	E SERVICE LLC				
30DJECT:	Name of Lim	ited Liability Company			
	'Amendment and fee(s) are sub	_			
	JASON HOOVER	_			
		Name of Person			
		Firm/Company			
	260 CHARLENE DR				
		Address			
	PANAMA CITY ,FL 3240	05		261	
	FRIENDLYCORPORATE	~		ZELLÄRÄST Zelläräräst	enter Fried
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notifiall:	ication)	0	2 T
JASON HOOVER		850 774-5778			
Name (of Person		Telephone Number	- 5 00 •	
Enclosed is a check for t	the following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	
Ман	ING ADDRESS:	STREET/COURI	FR 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

J&H TREE SERVICE 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 Company were filed on $\frac{05112017}{12017}$ and assigned Florida document number $\frac{L17000105162}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC," Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Emer Florida street address

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

. Florida

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VP	SHARON M HOOVER	260 CHARLENE	
		PC,FL 32401	Remove
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record specifies a delayed The 90th day after the reco	effective date, but ord is filed.	not an effective	time, at 12:01 a.m.	on the ea	rlier
11/28/2018 ded	2018				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00