47000120876

(Requ	restor's Name)	
(Addr	ess)	
(Addre	ess)	
(City/s	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busii	ness Entity Nai	me)
(Docu	ıment Number	
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



300306235543

12/04/17--01007--014 **30.00

FILED

17 DEC 4 M D2 4

SELVENOR SELVEN

A COSTON

COVER LETTER

TO; Registration Section Division of Corporations
SUBJECT: No Klova Morries Lawn Service, LLC 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:
Billy J Lee Jr Name of Person
No Move Worries Lawn Service, LLC. Firm/Company
1405 S Central Ave.
Flogler Beach FL 32136 City/State and Zip Code
lady bug 6.37.8 Q yahoo. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Billy Lee Jr at (386) 986-9396 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status 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

No Mon Worr	ed Liability Company (A Florida Limited Lia	Service, LL as it now appears on our ibility Company)	records.)	
The Articles of Organization for this Limited L	iability Company w	rere filed on <u>U</u>	2/17	and assigned
Florida document number <u>L17000120</u>	876			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name o	f the limited liabili	ty company here:		
The new name must be distinguishable and contain the w	ords "Limited Liability	Company," the designation	n "LLC" or the a	bbreviation 1.L.C."
Enter new principal offices address, if applic	able:			是胃工
(Principal office address MUST BE A STREE	T ADDRESS)			The man
Enter new mailing address, if applicable:				E CORP.
(Mailing address MAY BE A POST OFFICE	BOX)			2
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	••*	ce address on our r	ecords, enter	the name of the new
	1405 S	Central 1		
New Registered Office Address:	1700 0	Enter Florida stree	t address	•
	-Figgle	Beach	, Florida	3213U 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 Type of Action <u>Name</u> <u>Address</u> <u>Title</u> 54 Rickenbacker Dr ____ Add Thomas J Miller Palm Mast FC 32164 □ Change ☐ Remove ___ Change ☐ Remove _□ Change \Box Add _____ Change ☐ Remove _□ Change _□ Add

☐ Remove

_□ Change

-		<u></u>	<u> </u>	 	<u> </u>		_
	<u></u>						-
							_
			· · ·				_
							_
							_
				<u>. </u>			_
							_
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
	·····					17	_
 	 ·		<u> </u>			030	_
		_				4	- F. T. C.
				· <u>-</u> ·			_ [
	·	<u> </u>	<u> </u>			77. 19	-
				·		2 A A	_
		-					_
	 -				<u> </u>		_
m effective date in ote: If the date	if other than the is listed, the date mu inserted in this bi tive date on the D	st be specific and ock does not m	cannot be prior to eet the applicab	date of filing or mo	(option of the control of the contro	onal) filing.) Pursuant to 60 date will not be lis)5.020 sted a
record spe The 90th da	cifies a delayed y after the rec	d effective da ord is filed.	ate, but not	an effective tir	me, at 12:01 a	a.m. on the earl	lier (
nted	25/17	,	12:01a	.·			
	Dilly!	J. See	nomber or authori	zed representative o	f a member		

Page 3 of 3

Filing Fee: \$25.00