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WAR 26 2119 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Orlando Pest Control, LC 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:
Ranne of Person
Ochando Post Control 16
204 Dovefield Dr. Address
Belmont NC 280/2 City/State and Zip Code
E-mail address: (to be used for future annual report notification) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rodney Allman at (803) 325-0404 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, Certificate of Status \$\Bigcup \$\text{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



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

March 12, 2018

RODNEY LANE ALLMAN 204 DOVEFIELD DR BELMONT, NC 28012

SUBJECT: ORLANDO PEST CONTROL, LLC

Ref. Number: L17000140985

We have received your document for ORLANDO PEST CONTROL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.." "Ltd.." and "Co."

The document number of the name conflict is L06000096982.

Page 2 is missing.

L06000096982

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 618A00004933

RECEIVED MAR 2 6 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Orlando Pest	Control, LC
(Name of the Limited Liability Comps (A Florida Limited	Inv as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000/40985</u> .	were filed on June 29, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	Control, LC
The new name must be distinguishable and contain the words "Limited Liabi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	lity Company," the designation "LLC" or the abbreviation "L.L.C." [1617 S. Kirkman Road Orlando, FL 32812
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	204 Dove Field Drive Belmont, NC 28012
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address: 1617	S. Kirkman Road Enter Florida street address
<u>Orla</u>	ndo , Florida <u>328/2</u>
New Registered Agent's Signature if changing Registered Agent.	City 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

Page 1 of 3

MGR = M AMBR = A	lanager Authorized Member		
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Page 3 of 3

Filing Fee: \$25.00