

LI7000158541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Above Average 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:

AKil Oliver Jr.
Name of Person

Above Average Lawn Service LLC
Firm/Company

10430 SW 182nd st
Address

Miami FL 33157
City/State and Zip Code

aboveaveragelawn@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Akil Oliver Jr. at (786) 619-5606
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee
☐ \$30.00 Filing Fee & Certificate of Status
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RECEIVED
2003 SEP 26 PM 11:38
CORPORATION UNIT

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Above Average Lawn 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 10/7/2019 and assigned Florida document number L17000158541.

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 "L.L.C."

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:

Montia Ellis

New Registered Office Address:

10430 SW 182nd St

Enter Florida street address

Miami

City

Florida

33157

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.

Montia Ellis

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>	<u>Address</u>	<u>Type of Action</u>
<u>Mr.</u>	<u>William A. Merrill III</u>	<u>10430 SW 18th St</u>	<input type="checkbox"/> Add
		<u>Miami, FL 33157</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2023 SEP 26
SECRET
TALLAHASSEE, FL

2023 SEP 26 AM 11:38
SERIALIZED
FALL 2023

2023 SEP 26 AM 11:38
SERIAL 19000000000000000000
TALL 19000000000000000000

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 19th of September. 2023

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Akil Oliver Jr.

Typed or printed name of signee