

L17000197734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700316131547

08/06/18--01:11:26 ***0.00

18 AUG -6 11:26

AUG 13 2018

S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Guaranteed Tree 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:

Tayla Lynch

Name of Person

Guaranteed Tree Service LLC

Firm/Company

4141 Keystone Dr

Address

New Port Richey Florida 34652

City/State and Zip Code

tayla0215@outlook.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tayla Lynch

727 271-3081
at ()

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Guaranteed 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 09/25/2017 and assigned
Florida document number L17000197734.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Extreme Tree and Landscape LLC

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:

Enter Florida street address

City

Florida

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Tayla Lynch	4141 Keystone Dr	<input type="checkbox"/> Add
		New Port Richey Florida	<input type="checkbox"/> Remove
		34652	<input checked="" type="checkbox"/> Change
MGR	Brad Martinez	4141 Keystone Dr	<input type="checkbox"/> Add
		New Port Richey Florida	<input type="checkbox"/> Remove
		34652	<input checked="" type="checkbox"/> Change
MGR	Mikel Aucoin	4113 Schrooner Ln	<input checked="" type="checkbox"/> Add
		New Port Richey Florida	<input type="checkbox"/> Remove
		34652	<input type="checkbox"/> Change
MGR	Brandon Graham	4141 Keystone Dr	<input checked="" type="checkbox"/> Add
		New Port Richey Florida	<input type="checkbox"/> Remove
		34652	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Tayla Lynch 41%

Brad Martinecz 39%

Michael Avcom 10%

Brandon Graham 10%

E. Effective date, if other than the date of filing: 8/3/2018 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Tayla Lynch

Signature of a member or authorized representative of a member

Tayla Lynch

Typed or printed name of signer

18 AUG - 8 PM 11:26