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SECRETARY OF STATE TALLAHASSEE FLORIDA

D. BRUCE JUL 28 2018

COVER LETTER

TO:

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration of Division of	on Section f Corporations			
JLC K	Keeping It Green LLC			
SUBJECT:	Name of Lin	nited Liability Company		
	es of Amendment and fee(s) are sub	•		
	James C. Deviese	S		
		Name of Person		-
	JLC Keeping It Green L	rc		
		Firm/Company		•
	10581 Wood Ibis Avenu	e		SECRETARY TALLAHASS
		Address		AAR I
	Bonita Springs, FL 341	35		<u> </u>
	jlckeepingitgreen@yahoo	City/State and Zip Code		PN 4: 12 OF STATE EFLORIDA
For further informat	E-mail address:	to be used for future annual report noti- all:	fication)	Popular No.
James C. Deviese	e 	574 835-3860		
N	ame of Person	Area Code Daytim	e Telephone Number	
Enclosed is a check	for the following amount:			
□ \$25.00 Filing Fe	ee \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Re	IAILING ADDRESS: egistration Section ivision of Corporations	STREET/COURI Registration Section Division of Corpor	n	

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JLC Keeping It Green LLC	
(Name of the Limited Liabi (A Florid	ility Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability	Company were filed on 11/03/2017 and assigned
Florida document number L17000227931	·
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the lin</u>	nited liability company here:
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	ORESS)
Enter new mailing address, if applicable:	JUL 23
Mailing address MAY BE A POST OFFICE BOX)	
D. If amonding the registered egent and/or regis	istered office address on our records, enter the name of the ne
registered agent and/or the new registered office ad-	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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

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>	Type of Action
MGR	James C. Deviese	10581 Wood Ibis Ave	■ Add
		Bonita Springs, FL 34135	Remove
			□ Change
MGR	Joseph P. Rubin	10450 Tigress Lane	Add
		Bonita Springs, FL 34135	□ Remove
			□ Change
AMBR	Teresa K. Deviese	10581 Wood Ibis Ave	_□ Add
	Bonita Springs, FL 34135	□ Finove	
		JUMES CALLANASS	
AMBR	Jessica L. Deviese	10581 Wood Ibis Ave	ME AUTO THE
	Bonita Springs, FL 34135	S A Remove	
		Change	
			Add
		☐ Remove	
		☐ Change	
			☐ Remove

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record specifies a delayed effective date, but not an effective time, at 12:01 in the first file of the record is filed.	a.m.	on the	earli	ier o
ed July 15 2018				
(Ω_{i}, Ω_{i})				

Page 3 of 3

Filing Fee: \$25.00