

W18000018603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

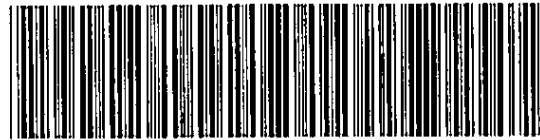
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/15/21--01013--003 **25.00

2021 APR 29 PM 2:43



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 JUN 29 PM 2:16

June 2, 2021

KYLE STATAM & COLTON JONES
1483 JUDY AVE.
CANTONMENT, FL 32533

SUBJECT: GROUND CONTROL LAWN CARE LLC
Ref. Number: L18000018603

We have received your document for GROUND CONTROL LAWN CARE 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 appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P00000088287.

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) 245-6050.

Alecia Rivers
Regulatory Specialist II

Letter Number: 721A00011891

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ground Control Lawn Care, LLC. name change

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:

Kyle Statam and Colton Jones

Name of Person

Ground Control Lawn Care, LLC.

Firm/Company

2494 Handy Rd

Address

Cantonment, FL 32533

City/State and Zip Code

gccllc2020@gmail.com

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

For further information concerning this matter, please call:

Brook Jones

850 712-6428

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 Address:

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

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

Ground Control Lawn Care, 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 1/22/2018 and assigned
Florida document number L18000018603.

This amendment is submitted to amend the following:

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

Ground Control Outdoor Services, L.L.C.

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)

1483 Judy Ave

Cantonment, FL 32533

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1483 Judy Ave

Cantonment, FL 32533

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:

Kyle Statam

New Registered Office Address:

1483 Judy Ave

Enter Florida street address

Cantonment

Florida

32533

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

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

Business phone number change to 850-712-6428

[illegible]


E. Effective date, if other than the date of filing: _____ (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 June 8 2021

 _____

Signature of a member or authorized representative of a member

MM MM

Kyle Statam

COLTON JONES

Typed or printed name of signee