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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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## **COVER LETTER**

TO:	. Registration Se Division of Cor			
418185 FF		awn And Landscape LLC		
SUBJI	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		David Starling		
		·	Name of Person	
		Fine Tune Lawn and Lands	scape LLC	
			Firm/Company	
		1153 Lake Shore Blvd		
			Address	
		Jacksonville FL 32205		
			City/State and Zip Code	<del></del>
		finetunelawncare@gmail.co	om to be used for future annual report notifi	cation)
For fur	ther information c	oncerning this matter, please ca	·	
Crysta	1 Hadley		386 916-1173	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
□ \$2	5.00 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

Fine Tune Lawn and Landsape LLC		
( <u>Name of the Limited Liat</u> (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability florida document number L18000081730	y Company were filed on 03/30/2018	and assigned
his amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
he new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	<b>8</b> J
		<b>8</b> 52 8
M. M. Wandlander		
nter new mailing address, if applicable:		<u> </u>
<u>Mailing address MAY BE A POST OFFICE BOX)</u>		မ် <u>း</u>
3. If amending the registered agent and/or registered agent and/or the new registered office ad Name of New Registered Agent:		enter the name of the
Name of New Regimered rigem.		
New Registered Office Address:	Enter Florida street address	
	Enter e tortua street autress	
	Flori	
	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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	David Starling	1153 Lake Shore Blvd	Add
		Jacksonville Ft 32205	Remove
			Change
			Add
			Remove
			☐ Remove
			☐ Change
			Remove
			Change
			Add
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fective date, if other than the date of filing:	(optional) or more than 90 days after filing.) Pursuant to	605.02
<u>ste:</u> If the date inserted in this block does not meet the applicable statutory for cument's effective date on the Department of State's records.	iling requirements, this date will not be	listed a
·		
record specifies a delayed effective date, but not an effectiv The 90th day after the record is filed.	re time, at 12:01 a.m. on the ea	arlier
ted		
Signature of a member or authorized representa		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00