118000082638

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Docu	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	





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COVER LETTER

Division of Co	rporations		
Southwind SUBJECT:	Lawn Services LLC		
SOBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Joshua Dodson		
		Name of Person	
		Firm/Company	
	426 Rich Bay Road		
		Address	
	Havana, FL 32333		
		City/State and Zip Code	
	jgdod@yahoo.com		
	E-mail address: (to be used for future annual report notif	lication)
For further information c	oncerning this matter, please c	all:	
Joshua Dodson		850 274-3836 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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:

TO:

Registration Section

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

Southwind Lawn Services LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L18000082638	were filed on 04/02/2018	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Southwind Tree Services LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		2020
(Principal office address MUST BE A STREET ADDRESS)	>: 	
	-Al-ASSE	So learns
Enter new mailing address, if applicable:	first	
(Mailing address MAY BE A POST OFFICE BOX)		75
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B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:	ddress on our records, enter the name o	f the new registered
Name of New Registered Agent:		-
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am fam rovided for in Chapter 605, F.S. Or, if t	iliar with and his document is

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
		<u></u>	
			☐ Remove
			Change
			
			🗖 Remove
			Change
-			□ Add
		□ Remove	
			Change
			
			Remove
			□ Change
		□ Add	
	·	Remove	
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			□ Remove
			□ Change

Effective date, if other than the date of filing: [If an effective date is listed, the date must be appoint and eason be prior to date of filing or more than 00 days after filing.) Pursuant to 603 0207. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The 90th day after the record is filed. Dated South Agrantic of a member or authonized representative of a member Joshua Daniel Dodson		ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Anginature of a member or authorized representative of a member	The 9	Oth day after the record is filed.
Anginature of a member or authorized representative of a member	Dated	18-9-19 Modson
Joshua Daniel Dodson		Signature of a member or authorized representative of a member
		Joshua Daniel Dodson

Page 3 of 3

Filing Fee: \$25.00