

L18000139345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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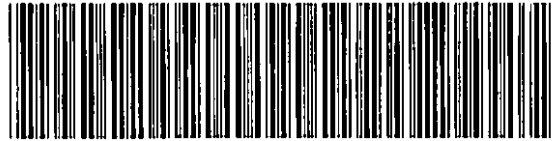
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

SUMMONS

JUL 18 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ECO FRIENDLY GROUP "L.L.C."

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:

MICHAEL A. HANSON

Name of Person

HANSON LAW OFFICE

Firm/Company

4211 W. WATERS AVENUE, STE. C

Address

TAMPA, FLORIDA 33614

City/State and Zip Code

Mhansonlaw@gmail.com

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

For further information concerning this matter, please call:

MICHAEL A. HANSON

813 766-2993
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**

ECO FRIENDLY GROUP "L.L.C."

(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 June 5, 2018 and assigned
Florida document number L18000139345.

This amendment is submitted to amend the following:

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

ECO FRIENDLY GROUP LLC

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) _____

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: MICHAEL A. HANSON

New Registered Office Address: 4211 W. WATERS AVENUE, SUITE C

Enter Florida street address

TAMPA, Florida 33614

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>	<u>Type of Action</u>
MGR	MIGUEL A AGUIAR-DELGADO	15507 Furlong Circle	<input type="checkbox"/> Add
		Odessa, Florida 33556	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	KEITH SAVAGE	3205 Kilmer Drive	<input checked="" type="checkbox"/> Add
		Plant City, Florida 33566	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PAUL M. GREGORY	1609 Sydney Road	<input checked="" type="checkbox"/> Add
		Valrico, Florida 33594	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MISTY KAE SAWYER	507 1/2 E. Caracas Street	<input checked="" type="checkbox"/> Add
		Tampa, Florida 33603	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BRIAN MUDD	3252 Bellericay Lane	<input checked="" type="checkbox"/> Add
		Land O Lakes, Florida 34368	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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.

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee