# U3000 167689

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sacrisso Linity Harris)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400325100554

02/26/19--01009--007 \*\*30.00

C. GOLDEN MAR 1 1 2019

### **COVER LETTER**

Division of Cor	N ENVIRONMENTAL S	ERVICES LLC	
SUBJECT: HLLMAI		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	CARIDAD TILLMAN		
		Name of Person	
	TILLMAN ENVIRON	MENTAL SERVICES LLC	
		Firm/Company	
	9606 NORFOLK	BLVD	
		Address	
	JACKSONVILLE FL 322	208	
		City/State and Zip Code	
		TALSERVICES@GMAIL.COM	
	E-mail address: (	to be used for future annual report notif	fication)
For further information c	oncerning this matter, please ca	all:	
CARIDAD TILLMA	N	at (518 ) 567-6858	
Name o	f Person		e Telephone Number
Enclosed is a check for the	ne 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

FILED

#### TILLMAN ENVIRONMENTAL SERVICES LLC

2019 FEB 26 PM 12: 05

111 113, 19 813 1

(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 Lia	bility Company	were filed on 7/	11/2018 and assigned
Florida document number L18000167689			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of	the limited liab	ility company he	<u>re</u> :
Rise and Shine Services LLC			
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the d	esignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	9606 Norfoll	k Blvd
(Principal office address MUST BE A STREET ADDRESS)		Jacksonville, FL 32208	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		3030 N. Rocky Point Dr. STE 150A	
		Tampa FL 3	3607
B. If amending the registered agent and/o registered agent and/or the new registered offi	ce address her		our records, enter the name of the new
New Registered Office Address:	7901 4th 5	St N STE 30 Enter Flor	O rida street address
	St. Peters	burg	, Florida 33702
		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>	Name	Address	Type of Action	
			Add	
			□ Remove	
			Change	
			Remove	
			Change	
			Add	
			Remove	
			Change	
			🗖 Add	
			□ Remove	
			Change	
			Add	
			Remove	
			Change	
			Add	
			Remove	
			Change	

_	· · · · · · · · · · · · · · · · · · ·
-	· · · · · · · · · · · · · · · · · · ·
_	
_	
Note: If	date, if other than the date of filing:
he recoi The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 0th day after the record is filed.
Dated	February 20 2019
	Signature of a member or authorized representative of a member
	Caridad Dillman
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00