

118000172955

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

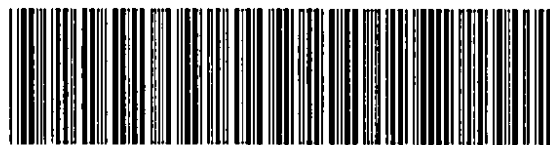
(Business Entity Name)

(Document Number)

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2018 DEC -7 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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UCS
12-13-18

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Vern Roberts Environmental Group LLC

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:

Mona Johnson

Name of Person

Vern Roberts Environmental Group LLC

Firm/Company

4902 113th Ave N

Address

Clearwater, FL 33760

City/State and Zip Code

mjohnson@vreg.biz

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

For further information concerning this matter, please call:

Mona Johnson

727 244-7867
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Vern Roberts Environmental Group 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 July 18, 2018 and assigned
Florida document number L18000172955.

This amendment is submitted to amend the following:

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

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:

4902 113th Ave N

(Principal office address MUST BE A STREET ADDRESS)

Clearwater, FL 33760

Enter new mailing address, if applicable:

4902 113th Ave N

(Mailing address MAY BE A POST OFFICE BOX)

Clearwater, FL 33760

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:

Mona Johnson

New Registered Office Address:

4902 113th Ave N

Enter Florida street address

Clearwater

City

Florida

33760

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

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TALLAHASSEE, FLORIDA

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>
AMBR	Vernon Roberts	12301 Eldon Dr,	<input type="checkbox"/> Add
		Largo, FL 33774	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mona Johnson	4902 113th Ave N	<input checked="" type="checkbox"/> Add
		Clearwater, FL 33760	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2018 DEC-7 PM 3:30
 CLERK OF DISTRICT COURT
 ALACHUA COUNTY, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

E. Effective date, if other than the date of filing: _____ (optional)

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.

Dated December 4, 2018

Me Fre

Mona Johnson, AMBR

Page 3 of 3

Filing Fee: \$25.00