

L18000214015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

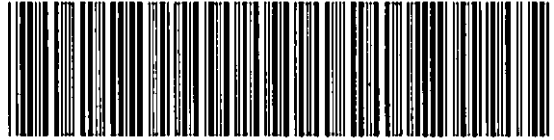
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

10/16/18--01018--015 **25.00

RECEIVED

OCT 15 2018

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S. PRATHE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 24, 2018

NEXT TO NATURE LANDSCAPES, LLC
4427 HORSESHOE AVE
NORTH PORT, FL 34286

SUBJECT: NEXT TO NATURE LANDSCAPES, LLC
Ref. Number: L18000214015

We have received your document for NEXT TO NATURE LANDSCAPES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

We also don't retain anything regarding the Operating Agreement, that is something that stays internally within the organization

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Stacy Prather
Regulatory Specialist III

Letter Number: 618A00021886

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Next to Nature Landscapes, 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:

Patricia Meisner
Name of Person

Next to Nature Landscapes, LLC
Firm/Company

4427 Horse shoe Ave
Address

North Port, FL 34286
City/State and Zip Code

Next2Naturelandscapes@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia Meisner at 941 223-5952
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)

Already
received

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**

Next to Nature Landscapes, 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 9/7/18 and signed

Florida document number L18000214015

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:

(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:

Christian Meisner / Patricia Meisner

New Registered Office Address:

4427 Monserhoe Ave.

Enter Florida street address

North Port

City

Florida

34286

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.

Patricia Meisner

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>
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AMBR	Patricia Meisner	4427 Horsehoe Ave	<input checked="" type="checkbox"/> Add
		North Port, FL 34286	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

AMBR	Christian Meisner	4427 Horsehoe Ave	<input checked="" type="checkbox"/> Add
		North Port, FL 34286	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

EIN: 83-2067953

E. Effective date, if other than the date of filing: 9/8/18 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated October 30, 2018.

Patricia Meisner

Signature of a member or authorized representative of a member

Patricia Meisner

Typed or printed name of signer

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2018 NOV -5 PM 6:25
SECRETARY OF STATE
TALLAHASSEE, FL