# L18000237446

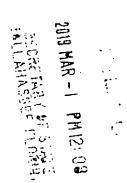
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## **COVER LETTER** -

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TO: Registration Section Division of Corporations	
SUBJECT: EVOlution Lawn Care LLC Name of Limited Liability Company	<u>,</u>
The enclosed Articles of Amendment and fee(s) are submitted for filing.	ン
Please return all correspondence concerning this matter to the following:	
Robert R Enamait III  Name of Person	4
Evolution Lawn Care LLC Firm/Company	
5400 Coraci Blud. Apt 5112	
Port Orange FL 32128  City/State and Zip Code  E-mail address: (to be used for future airdual report notification)	
For further information concerning this matter, please call:	
Robert R Enamart III at (386) 235-5850  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now appears on our records.)
imited Liability Company) The Articles of Organization for this Limited Liability Company were filed on (2018)Florida document number L18000237446 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Evolution Home Improvement and Landscape IIC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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: New Registered Office Address: Enter Florida street address City

### 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>	Address	Type of Action
			Add
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			☐ Change
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	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	January 24th . 2019  Robert R Emanus III  Signature of a member or authorized representative of a member
	Robert R Francit III. Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00