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MAR 1 3 2019 S. YOUNG

COVER LETTER

	Registration Sec Division of Corp		•	
SUBJEC		vn & Tractor Services LLC		
SOBOLIC		Name of Limit	ted Liability Company	
The encl	osed Articles of /	Amendment and fee(s) are subm	nitted for filing.	
Please re	turn all correspor	ndence concerning this matter t	o the following:	
		Brian Milton		
			Name of Person	
			Firm/Company	
		14348 Leonard Norman Ro	ad	
			Address	
		Macclenny FL 32063		
			City/State and Zip Code	
		Brian Hilton 92 E-mail address: (1)	1909 Mail. Com	cation)
For furth	er information co	oncerning this matter, please ca	11:	
Brian M	ilton		904 510-1301	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed	l is a check for the	e 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

Milton's Lawn & Tractor Services LLC		
(Name of the Limited Liabil (A Florid	lity Company as it now appears on our re la Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability (Florida document number L19000045420	Company were filed on February 14.	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "	<u> </u>
Enter new principal offices address, if applicable:		19 19
(Principal office address MUST BE A STREET ADD	RESS)	至 五
		
		P P
Enter new mailing address, if applicable:		——————————————————————————————————————
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or regi		ords, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	ldress
		, Florida
	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>	Type of Action
AMBR	Brandy Milton	1348 Leonard Norman Road Macclenny FL 32063	■ Add
			Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
		 	□ Change
			Add
			Change
			Add
			□ Remove
			Change
			☐ Remove
			Change

,	ion, enter change(s) here: (Attach ada	·····
		
		
		
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an effective date is listed, the date mus	ock does not meet the applicable statutory f	(optional) or more than 90 days after filing.) Pursuant to 605.0207 Iling requirements, this date will not be listed as
record specifies a delayed The 90th day after the rec		ve time, at 12:01 a.m. on the earlier of
February 26	2019	
Brin 11	1.15.	
	Signature of a member or authorized representa	nive of a member

Page 3 of 3

Filing Fee: \$25.00