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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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A. RIVERS
JAN 1 9 2022



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61 (R) 32+01111-4071 (**25,4.5)



COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: TE	TAN LAWN CARE Name of Lim	OF NWFL	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ASHLEY 1	VESTLEY	
		Name of Person	
		Firm/Company	
	7877 Marke	POTATE / NO.	
	7077 MARKS	Address	
	Maria E	12621	
	TELION, PL.	City/State and Zip Code	
	TETANPEU.	City/State and Zip Code LLC C GMAST. COM to be used for future annual report notif	
	E-mail address: (to be used for future annual report notif	ication)
For further information co	oncerning this matter, please ca	all:	
ASHIEY WES	:~EA	ar (86) \ 29/-2	585
Name of	f Person	at (850) 29/-2 Area Code Daytime	e Telephone Number
Enclosed is a check for th	ne following amount:		
▼ \$25,00 Filing Fee	S30,00 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 Addres	<u>s:</u>	Street Address:	

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

Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1.40

Town I AMM CARE (& NWF)

Company as it now appears on our rec	ords.)
imited Liability Company)	,
mpany were filed on Maren 2	25, 2019 and assigned
ed liability company here:	
PRO LLC	
d Liability Company," the designation "I	.L.C" or the abbreviation "L.L.C."
N/A	
<u> </u>	
N/A	•••
	; es
office address on our records, <u>en</u>	ter the name of the new registered
	in the
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· · · · · · · · · · · · · · · · · · ·	<u> </u>
	4 5
Enter Florida street ad	dress
	Florida
City	Zip Code
	d liability company here: Peo LLC d Liability Company, the designation "I N/A SSS) N/A Enter Florida street add.

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 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
AMBR	RACHEL WESTLEY	7077 MARISSA POINT LN	\dd
			□Remove
			□Change
AMBR	AVA WESTLEY	7077 MARISA POINT LN	🗹 Add
			□Remove
			Change
ANDR	EDEN WESTLEY	7077 MARKESSA POENT LN	(Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			Remove
			□Change

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<u>te:</u> If the da	, if other than e is listed, the date ite inserted in the ective date on the	is block does n	ot meet the ap	plicable statuto	ng or more than try filing require	(optional) 0 days after filing ements, this date	.) Pursuant to 605,020 will not be listed a
cord specifi s filed.	es a delayed eff	ective date, but	not an effectiv	ve time, at 12:0	l a.m. on the ea	rlier of: (b) Tl	ne 90th day after the
ed 12/	31/2021	_					
		/-1/	2/	nuthorized represe	<u></u>		
		Signature o	of a member of a	ESTLEY	entative of a men	iber	
			1	•			

ENTER TO BORROW