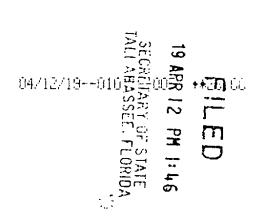
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	(Requestor's Name)	
	(,	
	(Address)	
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	(City/State/Zip/Phone #)	
PICK-UF	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
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T SCHROEDER

COVER LETTER

SUBJECT.	Full Service	Lawncare LLC				
OBJECT:		Name of Limi	ted Liability Company			
The enclosed	d Articles of a	Amendment and fee(s) are subr	nitted for filing.			
Please return	ı all correspo	ndence concerning this matter t	to the following:			
		David Ford-Coates				
			Name of Person			
			Firm/Company			
		5077 Fruitville Road. Suite 109-126				
		Sarasota, FL 34232	Address			
		davidfordcoates@gmail.con	City/State and Zip Code			
			o be used for future annual report notific	cation)		
For further in	nformation co	oncerning this matter, please ca	II:			
David Ford-	-Coates		941 840-0099			
	Name of	Person	at () Area Code Daytime	Telephone Number		
Enclosed is a	a check for th	e following amount:				
3 \$25.00 F	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

TO:

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

Full Service Lawncare LLC

(Name of the Limit	ted Liability Compa (A Florida Limited	ny as it now appears on our re Liability Company)	cords.)			
The Articles of Organization for this Limited L Florida document number $19-95$	iability Company ろ <u>しひ</u> .	were filed on April 5, 2019	and assigned			
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name o	f the limited liab	oility company here:				
Full Service Lawn LLC						
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation	'LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applic	able:	5077 Fruitville Road	19 SE			
(Principal office address MUST BE A STREE	ET ADDRESS)	Suite #109-126	<u> </u>			
		Sarasota, FL 34232				
en			E PA IT			
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>					
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	_		ords, enter the name or the nev			
Negoties -	5077 E	Daniel Colina #100 136	· · · · · · · · · · · · · · · · · · ·			
New Registered Office Address:	5077 Fruitville Road, Suite #109-126 Enter Florida street address					
	Sarasota	14222				
	Sarasota	City	, Florida 34232 Zip Code			
New Registered Agent's Signature, if changing	Danieturad Agants	-				
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as registeing filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as registered office	performance of my dutie. provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is			
	If Cha	nging Registered Agent, Signa	ture 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
			🖸 Remove
			☐ Change
			☐ Remove
		——————————————————————————————————————	SELLE TAR
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		SEE. FLORIDA	Change
			Change
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			Change
			Remove
			Change
			🗖 Add
			□ Remove
			Change

David Ford-Coates - MGF		_				
5077 Fruitville Road		-				
Suite #109-126						
Sarasota, FL 34232						
James DeWitt - MGR						
5077 Fruitville Road						
Suite #109-126			<u>.</u>			
Sarasota, FL 34232					#	
						19 A
					HASS MASS	20
						-
					STA LOR	= (
					Bri	<u>e</u>
etive date, if other than to effective date is listed, the date is: If the date inserted in this ment's effective date on the	nust be specific a block does not	nd cannot be prior to meet the applicab			after filing.) Pur	
ecord specifies a delay e 90th day after the r			an effective	e time, at 12:	01 a.m. on	the earli
d April 8		2019	. ·			
/	\bigcirc .	Foul	1	ates		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00