## 119000 144327

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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## **COVER LETTER**

TO: Registration Division of C			
Bert's Lav	wnCare & Handyman Services		
SOBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Bertram Bent		
		Name of Person	
	2009 Beecher st	Firm/Company	
	2009 Beecher st		
	Orlando Florida 32808	Address	
	bertrambent@yahoo.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report noti-	fication)
For further information	concerning this matter, please ea	all;	
Bertram Bent		407 797-5370 at ()	
Name	of Person	Area Code Daytime	e 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)

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



August 20, 2019

BERTRAM BENT 2009 BEECHER STREET ORLANDO, FL 32808

SUBJECT: BERT'S LANDSCAPING & PROPERTY MANAGEMENT LLC

Ref. Number: L19000144327

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

The document must be signed by a member or an authorized representative of a member.

The name of the person signing the document must be typed or printed beneath or opposite the signature.

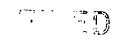
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 919A000172013

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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Bert's Landscaping 🥇 Property Management LLC	
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on May 30, 2019 and assigned
Florida document numberL19000144327	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
Bert's Lawncare & Handyman Services LLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2009 Beecher St
(Principal office address MUST BE A STREET ADDRESS)	Orlando Fhorida
	32808
Enter new mailing address, if applicable:	2009 Beecher St
(Mailing address MAY BE A POST OFFICE BOX)	Orlando Florida
	32808
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her   Name of New Registered Agent:  New Registered Office Address:	ffice address on our records, enter the name of the re:  Enter Florida street address
	, 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person\_being added or removed from our records:

MGR = Manage	r		
AMBR = Authori	zed Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			□ Change
			☐ Remove
			□ Change
			□ Add
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Effective date, if other than the If an effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the D	it he specific and cannot be prior to do ock does not meet the applicable	ate of filing or more than 90 days afte	tional) er filing.) Pursuant to 605.0201 its date will not be listed as
ne record specifies a delayed The 90th day after the rec	l effective date, but not ar ord is filed.	n effective time, at 12:01	a.m. on the earlier o
Dated August 29	2019	_	
De.	hom Be	nt	
	Signature of a member or authorize	o representative of a member	
Bertram Bent			

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Filing Fee: \$25.00