

L200000 46056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

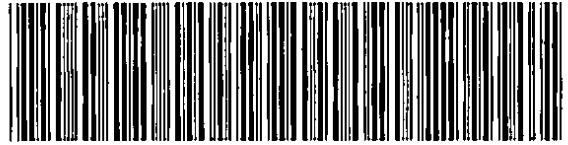
(Business Entity Name)

(Document Number)

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04/01/20--01017--011 **25.00

DEPARTMENT OF STATE
DIVISION OF CORPORATION
211 ARL STREET, N.W.
WASHINGTON, D.C. 20540

2020 APR - 1 AM 7:06

FILED

APR 14 2020

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DIAZ LAWN SERVICE LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEJANDRO DIAZ

Name of Person

Firm/Company

2519 MYER AVE.

Address

LEESBURG FL 34748

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at (_____) _____

Area Code

Daytime 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 Address:

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**

DIAZ LAWN SERVICE L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2020 APR - 1 AM 7:07
CLERK OF COUNTY OF
FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/10/2020 and assigned
Florida document number L20000046056.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" 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

Florida

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>	<u>Type of Action</u>
MGR	MARTIN DIAZ JR	2519 MYER AVE	<input type="checkbox"/> Add
		LEESBURG, FL 34748	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARTIN DIAZ SR	2519 MYER AVE.	<input type="checkbox"/> Add
		LEESBURG, FL 34748	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARTIN DIAZ	2519 MYER AVE.	<input type="checkbox"/> Add
		LEESBURG, FL 34748	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	YULIANA DIAZ	2519 MYER AVE.	<input type="checkbox"/> Add
		LEESBURG, FL 34748	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MARTIN DIAZ	2519 MYER AVE.	<input type="checkbox"/> Add
		LEESBURG, FL 34748	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	JANET DIAZ-GUTIERREZ	2519 MYER AVE.	<input checked="" type="checkbox"/> Add
		LEESBURG, FL 34748	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020; (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated _____, _____.

Alexandro Diaz
Signature of a member or authorized representative of a member

ALEJANDRO DIAZ

Typed or printed name of signee