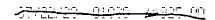
## LZ0 000083308

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



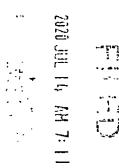
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RECEIVED

JUL 1 4 2020



AUG 2 6 2020 S. YOUNG

## **COVER LETTER**

Division of Corporations
SUBJECT: World Class Lawn Scrvices 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:
Taylor Lee Stelley Name of Person
World Class Lawn Services & LLC. Firm/Company
4101 O'berry Rd Address
KISSIMMCE FL. 34746 City/State and Zip Code
Taylor Stelley 7700 9 mail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Taylor Stelley at (407) 615-9916 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Status Solution Status Status Solution Status Solution Status Solution Status Status Solution Status Status Solution Status Status Solution Status Status Status Solution Status Status Solution Status St

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

		<u>~</u>
(Name of the Limited	Liability Company as it now appears on our record A Florida Limited Liability Company)	
(A	( Florida Limited Liability Company)	<u> </u>
The Articles of Organization for this Limited Liab	bility Company were filed on 3/16/2	20 and assigned
EL 11 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 18	
Florida document number <u>L L OOOO (5)</u>	200	
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	-
-	· · · · ·	
79	ANT STREET OF THE PROPERTY.	W
the new name must be distinguishable and contain the wor	os Limited Liability Company, the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ble:	
•		
Florida document number \( \begin{align*} \begin{align*} \lambda & \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Enter new mailing address, if applicable:	<del></del>	
(Mailing address MAY BE A POST OFFICE BO	OX)	
	<del></del>	
		the name of the new registered
agent and/or the new registered office address	<u>here</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florida street addres	
	Line 1 long sires mures	•
	, Flo	orida
	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 = Manager AMBR = Authorized Member

<u>l'itle</u>	Name	Address	Type of Action
MGL	Richard Stelley		□Add
	,	4101 Oberry ld Vissimmec Fl 34746	Remove
			Change
<u>-</u>			□Add
			□Remove
			□ Change
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. Effective dat	te, if other than the date of filing: (optional)	
(If an effective da Note: If the d	te, if other than the date of filing:	5.0207 ted as
the record special cord is filed.	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
Dated 07/	10120	
<u></u>	Taylor Signature of a member or authorized representative of a member	
4		