## L20000 182906

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

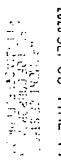


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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 10, 2020

JOSE L FELIX CROIX LAWN CARE & PRESSURE WASHING LLC 4362 TRUSSELL TRAIL APOPKA, FL 32712

SUBJECT: CROIX LAWN CARE & PRESSURE WASHING LLC

Ref. Number: L20000182906

We have received your document for CROIX LAWN CARE & PRESSURE WASHING LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Shelia S Young Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

SUBJECT: COLX	Lawn Care &	Pressure Washing Lited Liability Company	LIC
		J	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Jose L Fe	Name of Person	
	Croix Lawn	Care and Pressure	Washing LLC
	4362 Trussell	Trail & Address	
	Apopka FL	32712 City/State and Zin Code	
	JLFelix 1978 0 E-mail address: (1	City/State and Zip Code  Cinail - Com to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca		,
Jose L J	Person	at ( <u>407</u> ) <u>780 - 7</u> Area Code Daytime	S46 Telephone Number
Enclosed is a check for the	e 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

Registration Section

**Division of Corporations** 

TO:

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**

Croix Lawn Care (Name of the Limite	d Liability Company	urt Washing	LLC dur records.)	SEP 30
			•	
The Articles of Organization for this Limited Lie		are fried on	1 2000	<u>25 ting</u> <b>33</b> ilinga-
Florida document number <u>L 2000 o 18 29</u>	<u>0b</u>			37 -
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabilit	y company here:		
The new name must be distinguishable and contain the wo	rds "Limited Liability	Company," the designar	tion "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:		<del>.</del>	
Principal office address MUST BE A STREET	ADDRESS)			<del></del>
	-			
Enter new mailing address, if applicable:	-			
Mailing address MAY BE A POST OFFICE E	(OX)		·	
	-			
B. If amending the registered agent and/or re	and the second s	lress on our record	s, <u>enter the nar</u>	ne of the new registered
agent and/or the new registered office address	s here:			
Name of New Registered Agent:	Jose 6	Felie		
Name of New Registered Agent.		<u> </u>		<del></del>
New Registered Office Address:	4362 7	Feligussell fiail Enter Florida str	eet address	
	Anak	THE TWENTY	*71 * 1	32717
	- VINVA	City	Florida	Zip Code
New Registered Agent's Signature, if changing R		•		-

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.

nanging Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized	to manage, enter the title, name, and address of each person b	eing added
or removed from our records:	• • •	

MGR = Manager AMBR = Authorized Member **Title Name Address Type of Action** 4362 Trussell Trail Apophe, FL BADD Mar Jose L Felix □Remove \_\_\_\_\_ □Change Josandi Bantista - Felia Mar 4362 Trussell Trail Apopka, FL 32712 \_\_\_\_ Remove \_\_\_\_\_ □Change □ Remove \_\_\_\_ □Change \_\_\_\_\_\_ 🗆 🗖 Add \_\_\_\_\_ □Change \_\_\_\_ □Remove \_\_\_\_\_ □Change \_\_\_\_\_ 🗀 Add

\_\_\_\_\_ □Change

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effective date :: If the da	e is listed, the da te inserted in	in the date of the must be spec- this block doe, the Departme	ific and can s not meet	the appi	licable sta	of filing or m tutory filin	ore than g requi	<b>(optio</b> 90 days after rements, this	filing.) Pursu	ant to 605.02 of be listed :
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