

L20000221643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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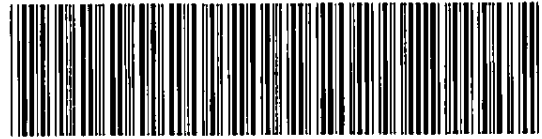
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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R. HUNT

02/24/23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Royal Yards Landscaping and maintenance 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:

Shelley Coker
Name of Person

Firm/Company

901 Wyoming Ave
Address

St Cloud FL 34769
City/State and Zip Code

RoyalYardsLandscaping@gmail.com
E-mail address: (to be used for future annual report notification)

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JAN 24 PM 3:03
TALLAHASSEE FL

For further information concerning this matter, please call:

Shelley Coker at (407) 558-7417
Name of Person 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**

Royal Yards Landscaping and Maintenance LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 7/27/2020 and assigned Florida document number L20000221643

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:

Shelley Coker

New Registered Office Address:

901 Wyoming Ave

Enter Florida street address

St Cloud

City

Florida

34769

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

Title	Name	Address	Type of Action
NGRM	ASHLEY PIERSON	2051 9th St	<input type="checkbox"/> Add
		St CLOUD FL 34769	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
NGRM	AUSTIN COKER	2051 9th St	<input type="checkbox"/> Add
		St CLOUD FL 34769	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
NGRM	Shelley COKER	901 Wyoming Ave	<input checked="" type="checkbox"/> Add
		St CLOUD FL 34769	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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STATE OF FLORIDA
CLERK OF THE COURT
JANUARY 21, PM 3:03
TALLAHASSEE, FL

(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 605.0207 (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 Feb 16, 2023.

Ein Cohen

Signature of a member or authorized representative of a member

ERIC COVER

Typed or printed name of signee