120000260837

(Re	questor's Name)	
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	y/State/Zip/Phon	- #\
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO:

Registration Section Division of Corporations

·			v d
SUBJECT: JEF	REMY DOES THAT, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	andence concerning this matter	to the following:	
	JER	EMY SUNDIN	
		Name of Person	
	JEF	REMY DOES THAT, LLC	202
		Firm/Company	2 AP
	133	BLOVE RIDGE CT.	
		Address	2022 APR 15 PH 12: 26
	TAI	LAHASSEE, FL 32312	25
		City/State and Zip Code	- E
	JEREMY.	SUNDIN@GMAIL.COM to be used for future annual report not	ntication)
For further information of	concerning this matter, please c	·	
JEREMY SU	INDIN	at (<u>850</u>) <u>528-6355</u>	
	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he following amount:		
XI \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address:	ontion
Registration Division of C		Registration Se Division of Co	
P.O. Box 632	•	The Centre of	
Tallahassee,		2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JEREMY DOES THAT	T, LLC		
(Name of the Limit	d Liability Compa A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Li. Florida document number <u>L20000260837</u> This amendment is submitted to amend the follo		were filed on AUGUST 24, 2020	and assigned
A. If amending name, enter the new name of	the limited liah	ility company here:	
GOOD SOIL SEPTIC SERVICE, LLC			
The new name must be distinguishable and contain the we	ords "Limited Liabil	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applica (Principal office address MUST BE A STREE)		133 LOVE RIDGE CT TALLAHASSEE FL 32312	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	BOX)	_SAME AS ABOVE	
B. If amending the registered agent and/or re agent and/or the new registered office address	gistered office a	iddress on our records, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	NA	.=-	
New Registered Office Address:	NA		
		Enter Florida street addrass	
	NA	Florida	NA
		Cin	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.

NA	
If Changing Registered	gent, 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

Title	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			□Change
		□Remove	
			□ Change
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Effectiv	ve date, if other than the date of filing:(optional)
(ii an eile Note:	cuve date is fisied, the date must be specific and cannot be prior to date of filing or more than 00 days of the
docume	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as not's effective date on the Department of State's records.
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e record	specifies a delayed offseting day but the
nd is file	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 d.
.	
Dated_	
	Signature of a member or authorized representative of a member
	,
	JEREMY SUNDIN

Filing Fee: \$25.00