

L21000027042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

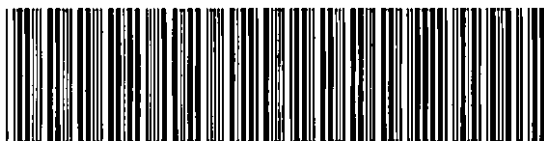
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2021 APR - 7 P 3:50

21 APR - 5 PM 4:12

LLC
V/C
&
Amend.

APR - 8 2021

D CONNELL

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-54372
(850) 524-6243

(OFFICE USE ONLY)

Business Name & Document Number, (if known):

1. Privy Landscaping & Maintenance L21000027042
Name Document Number (if known)

Walk in Will wait

Certified Copy
 Certificate of Status

NEW FILINGS

Profit
 Not for Profit
 Limited Liability
 Domestication
 INC
 OTHER - Corp

AMENDMENTS

Amendment
 Resignation of R. A. Officer/Director
 Change of Registered Agent
 Dissolution/Withdrawal
 Conversion
 Merger

OTHER FILINGS

Annual Report
 Fictitious Name
 Statement of Authority
 APOSTIL () _____

COUNTRY

REGISTRATION/QUALIFICATIONS

Foreign Filing
 Limited Partnership
 Reinstatement
 Trademark
 Other

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2021

FLORIDA CAPITAL COURIER SERVICES, INC.
WALK-IN

SUBJECT: PRIVY LANDSCAPING & MAINTENENCE LLC
Ref. Number: L21000027042

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

The current name of the entity is as referenced above. Please correct your document accordingly.

The name of a limited liability company must contain the designation "L.L.C.," "LLC," or the words "LIMITED LIABILITY COMPANY." Please amend the name of your entity accordingly.

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.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 221A00007112

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Privy Landscaping & 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:

Jengsee Phelix
Name of Person

Privy Landscaping & Maintenance LLC
Firm/Company

9825 NE 2nd ave unit 530293 Mia, 33153
Address

Miami FL 33168
City/State and Zip Code

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

For further information concerning this matter, please call:

Jengsee Phelix at (786) 702-6271
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**

Privy Landscaping & 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 1/12/2021 and assigned Florida document number L21000027042.

This amendment is submitted to amend the following:

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

Privy Landscaping & Maintenance LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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)

FILED
2021 APR - 7 P 3:51

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

_____, Florida _____

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 Changing Registered Agent, Signature of New Registered Agent

