## LZ1000069470

(Re	questor's Name)	<u> </u>
(Ad	dress)	
DA)	dress)	
(	,	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
g (Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

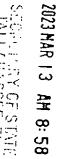




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5/9/23 V:LN



FILED

## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJEC	Standley Se	ervices LLC		
ou ou re	~··	Name of Lin	ited Liability Company	- <del>,</del>
7 <b>73</b> 51		Samuel 18 44	to the see	
		Amendment and fee(s) are sub	-	
Please re	eturn ali correspo	ondence concerning this matter	to the following:	
		Christopher Standley		
			Name of Person	
		Standley Pest Control LLC		
			Firm/Company	
		326 SE 32nd Ave		
			Address	
		Ocala, FL 34471		
			City/State and Zip Code	
		chris.standleypest@gmail.e	om to be used for future annual report notific	estion
For furth	er information e	oncerning this matter, please ca		attory
		oncerning this matter, predice of		
Christop	her Standley	en.	352 208-8703 at ()	
	Name of	r Person	Area Code Daytime T	Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Secti	ion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Standley Services		
( <u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C		and assigned
Florida document number 1.21000069470		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
Standley Services LLC		
The new name must be distinguishable and contain the words "Lim	oited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	2
		23
		<b>5 5 1</b>
Enter new mailing address, if applicable:		SSO E M
(Mailing address MAY BE A POST OFFICE BOX)		SSO 3 M
		To a U
B. If amending the registered agent and/or registered	d office address on our records, <u>enter th</u>	
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Flori	da
<del></del>	City	Zip Code
New Registered Agent's Signature, if changing Registered	d 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

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
	<del></del>		□Add
			Remove
			□Change
			□Add
			Remove
			□ Change
			□Add
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			□Change
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			Remove
			(716th

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L' ffeet	Son data (Carbana da an da an CC)
If an ef Note:	ive date, if other than the date of filing:  [cetive 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as lent's effective date on the Department of State's records.
e recoi rd is fi	d 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 led.
Dated	03/07/2023
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00