KZ1000244846

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(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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06/08/21--01023--016 **55.00

COVER LETTER

TO:	Registration Sec Division of Corp		ŧ	
CUBIC		Narrow Lawncare LLC		
SUBJE	CI:	Name of Limi	ted Liability Company	
The enc	Hosed Articles of A	amendment and fee(s) are subr	mitted for filing.	
Please r	eturn all correspon	dence concerning this matter t	to the following:	
		Shannon Stahlin		-
			Name of Person	
		Direct Inc.		
			Firm/Company	
		PO Box 7089		
			Address	
		Ann Arbor, MI 48107		
			City/State and Zip Code	
		documents@directincorp.		
			o be used for future annual report notific	
For furt	her information co	ncerning this matter, please ca	ill:	
<u>-5h</u>	Name of	tablin Person	at (<u>X17</u>) <u>281-69</u> Area Code Daytime	C(() Telephone Number
Enclose	d is a check for the	e following amount:		
□ \$ 25	i.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 S		<u>Street Address:</u> Registration Sect	ion

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

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

Straight and Narrow Lawncare LLC					
(<u>Name of the Limited Li</u> (A Fl	ability Company as lorida Limited Liabili	it now appears on o ty Company)	ur records.)		
The Articles of Organization for this Limited Liability Company were filed on 05/25/2021 Florida document number L21000244846				and assigned	
This amendment is submitted to amend the following	g:				
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 Co	ompany," the designa	tion "LLC" or the abbr	eviation "L.L.C."	
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET AL	DDRESS)				
				<u> </u>	
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX	Q				
				-641	
B. If amending the registered agent and/or regist agent and/or the new registered office address her		ess on our record	is, <u>enter the name</u>	of the new registered	
Name of New Registered Agent:				L'S	
		· · · · · · · · · · · · · · · · · · ·		C i	
New Registered Office Address:	 -	Enter Florida sti	eet address		
-		City	Florida	Zip Code	
New Registered Agent's Signature, if changing Regist	tered Agent:				
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	ent and agree to nd complete perf ed agent as provi stered office add	formance of my a ded for in Chapt	luties, and I am fa er 605, F.S. Or, ij	miliar with and this document is	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

4

<u>Title</u>	Name	Address	Type of Action
AMBR	Keith Keith	7749 Normandy Blvd Ste 121	
		Jacksonville, FL. 32221 US	Remove
		7749 Normandy Blvd Ste 121	□Change
AMBR	Keith Taylor	Jacksonville, FL. 32221 US	■Add
			□Remove
			□ Change
			□Add
			Remove
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

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ctive date if other tha	n the date of filis	no:		(on	tional)	
ctive date, if other tha effective date is listed, the da	te must be specific as	nd cannot be prior to	o date of filing or n	ore than 90 days aft	er filing.) Pursuant to	605.02
e: If the date inserted in target in the interior in the inter			ble statutory filin	ig requirements, th	his date will not be l	isted
micht's checuve date on	are Department of	Saite 3 records.				
1 '7' 11 1 1	St. C. Sea Brown	e a comprehensión	12-01	45	the OOth day a	0 1
ord specifies a delayed ef filed.	lective date, but no	ot an effective un	ne, at 12:01 a.m.	on the earlier of:	(b) The 90th day a	Her u
_ 06-02		2021				
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6d 06-02 5-5-						
			ized representative	f n mumbar		
•	Signature of a	a member or author	nzed representative	or a memoer		

Filing Fee: \$25.00