

L 21000338335

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(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mow Bros Outdoor Services, 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:

Mario Britton
Name of Person

Mow Bros Outdoor Services
Firm/Company

110 N. Mills Ave., Apt. C,
Address

Orlando, FL 32801
City/State and Zip Code

mario.britton4@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mario Britton at (563) 484-1507
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Mo' Bros Outdoor Services, 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 July 26, 2021 and assigned Florida document number L21000338335.

This amendment is submitted to amend the following:

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

Mo' Bros Outdoor Services LLC

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)

110 N. Mills Ave., Apt. C
Orlando, FL 32801

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:

Deborah A Gonzalez (CEO)

New Registered Office Address:

110 N Mills Ave., Apt. C

Enter Florida street address

Orlando

City

Florida

32801

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.

Deborah A. Gonzalez

If Changing Registered Agent, Signature of New Registered Agent

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Mario Britton	110 N. Mills Ave, Apt C	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	William A. Schultz	110 N Mills Ave., Apt C	<input type="checkbox"/> Add
		Orlando, FL 32801	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
CEO	Deborah Gonzales	110 N mills Ave. Apt C	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 01/31, 2024

William A. Schultz

Typed or printed name of signee