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(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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A. RIVERS
JAN 1 0 2022



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COVER LETTER

TO:

TO: Registration S Division of Co			
our room		'N SERVICE LLC	
SUBJECT:		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	-
		Firm/Company	_
	17350 STATE HWY 249 S	STE 220	
		Address	_
	HOUSTON, TX 77064		_
	EFILE1234@INCFILE.CO	City/State and Zip Code M	
	~	to be used for future annual report notification)	
For further information	concerning this matter, please c	all:	
LOVETTE DOBSON		l 888-462-3453	
Name	of Person	Area Code Daytime Telephone Numbe	ır.
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	310

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IGS LAWN	SERVICE LLC		
lity Company da Limited Lia	y as it now appears (ability Company)	on our records.)
Company w	vere filed on 09/28	3/2021	and assigned
nited liabili	ity company here	•	
mited Liability	y Company," the des	ignation "LLC"	or the abbreviation "L.L.C."
		<u></u>	
ORESS)		_	
ed office ad:	ldress on our rec	ords, <u>enter tl</u>	he name of the new reg
			207
	Enter Florid		rida :
	City	,	rida <u>Zip</u> Code
ed Agent:			
		pacity I furt	ther agree to comply w
	company v	City Company as it now appears of a Limited Liability Company) Company were filed on 09/28 Onited Liability company here mited Liability Company," the desired company were filed on our recent the company of the c	lity Company as it now appears on our records. It is a Limited Liability Company) Company were filed on O9/28/2021 Inited liability company here: Inited Liability Company," the designation "LLC" RESS) Enter Florida street address Florida Street address

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	James Higdon	1503 4th Ave W	□Add
		Palmetto, FL 34221	■Remove
			□Change
AMBR James Hi	James Higdon Jr.	1503 4th Ave West	≡ Add
		Palmetto, FL 34221	□ Remove
			Change
			Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
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Note:	ive date, if other than the date of filing:
he recore	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 ed.
Dated	DECEMBER, 15 , 2021 ,
	Signature of a member or authorized representative of a member
	Kiana Higdon
	Typed or printed name of signee