

L21 000534802

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

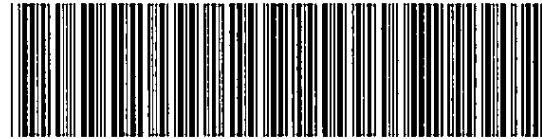
(Business Entity Name)

(Document Number)

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FILED

2022 FEB 14 PM 1:01

SECRETARY OF STATE  
TALLAHASSEE, FL

A. BUTLER

FEB 23 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Beasley's Lawn Service  
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:

James Beasley  
Name of Person

Beasley's Lawn Service  
Firm/Company

5440 Donnybrook Avenue  
Address

Ind. 32209  
City/State and Zip Code

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

For further information concerning this matter, please call:

Hattie Mullings at ( 901 ) 224-5307  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32304-6327

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
200 South Adams Street  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

2022 FEB 14 PM 1:01

BEASLEY'S LAWN SERVICE LLC  
(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 12/21/2021 and assigned  
Florida document number L21000534802.

This amendment is submitted to amend the following:

**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 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)**

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:

Harrie Mullings

New Registered Office Address:

5040 Donnybrook Avenue

Enter Florida street address

Jacksonville

City

Florida

Zip Code

32219

**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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	James Beasley	5040 Donnybrook Avenue	<input type="checkbox"/> Add
		Jacksonville Fl. 32209	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Hattie Mullins	9068 Galloway Rd.	<input checked="" type="checkbox"/> Add
		Jax. fl. 32219	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Dawanda Dewsey	9068 Galloway Rd.	<input checked="" type="checkbox"/> Add
		Jax. fl. 32219	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<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)

If the record 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 record is filed.

Arthur M. O'Connell  
Signature of a member or authorized representative of a member

Hattie Mullins  
Typed or printed name of signer

**Filing Fee: \$25.00**