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Y. SCOTT JUN 2 1 2022

## **COVER LETTER**

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SUBJE	J&S Premi	er Lawn Care, LLC		
SOBJE	C1	Name of Lin	nited Liability Company	
The end	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please 1	eturn all correspo	ondence concerning this matter	to the following:	
		Jeremy Schraufnagl		
			Name of Person	
				2022 APR 29 PM 3: 09 SECRETARY OF STATE TALLAHASSEE, FL
			Firm/Company	APR 29 PM C
		301 Stone Arbor Ln		9 PM
		S. 1. 17 22007	Address	STA E.F.
		St Augustine FL 32086	Civ. (Civ. 177 Civ.)	TE
		jeremyschraufnagl3@gmail	City/State and Zip Code	
		E-mail address: (	to be used for future annual report noti	fication)
For furt	her information c	oncerning this matter, please c	all:	
Jeremy	Schraufnagl		904 506-8985 at ( )	
Name of Person			e Telephone Number	
Enclose	d is a check for th	ne following amount:		
<b>■</b> \$25	.00 Filing Fee	S30.00 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassee e Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J&S Premier Lawn Care 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 01/24/2022 and assigned Florida document number L22000025959 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 above viction "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: New Registered Office Address: Enter Florida street address \_, Florida \_

## 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jeremy Schraufnagl	301 Stone Arbor Ln	□Add
		St Augustine FL 32086	□Remove
			\bullet Change
			□Add
			□Remove
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Effective date, if other than the	e date of filing:		(optio	nal)		
f an effective date is listed, the date must Note: If the date inserted in this bloom is the state of the sta	st be specific and cannot be prio	r to date of filing or mo	te than 90 days after f	iling \ Pursum	nt to 605.	.0207
locument's effective date on the D	epartment of State's records	s.	requirements, titis	date will not	i de fisie	u as
report annoites a delegant official		ime, at 12:01 a.m. o	n the earlier of: (b)	The 90th d	lay after	the
record specifies a delayed effectived is filed.	e date, but not an effective t					
a is mea.						
record specifies a delayed effective dis filed.  Dated April 26th	2022					
a is mea.						
a is mea.		orized representative c	of a member			