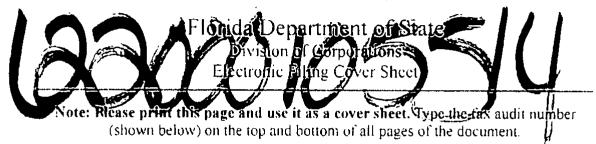
2/16/23, 4:43 PM

Division of Corporations



(((H23000062152 3)))



H230000621523ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNBRUST LAWN CARE LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

FEB 20 2.23 Help

ö

TO:

Registration Section

Barrier Barrier

COVER LETTER

Div	ision of Cor	porations			
		T LAWN CARE LLC			
SUBJECT:		Name of Limi	ted Liability Company	,	
•					
The enclosed	d Articles of	Amendment and fee(s) are sub-	nitted for filing.		•.
Please retuin	i all coirespo	ndence concerning this matter t	to the following:		
		Cheyenne Moseley			
			Name of Person		
		Legalzoom.com, Inc.			
			Firm/Company		
		101 N Brand Blvd 11th Fl			
			Address		<u>· </u>
		Glendale, CA 91203			
	- •		City/State and Zip Co	od:	
		fullypersuaded88@gmail.co			
Car tarkar in	athematica cu	t-mail address: (to procuring this matter, please ca	be used for future and	aual report notifi	ication)
		oncoming this matter, please ca			
Cheyenne M			800 at ()	773-0888 	Telephone Number
	Name of	Person .	Arta Code	Daytime	Telephone Number
Enclosed is a	check for th	e following amount:			
□ \$ 25.00 Fi	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55 00 Filing F Certified Copy (additional copy is	y	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	Registra	NG ADDRESS: thon Section t of Corporations x 6327	Regis Divis	EET/COURIE stration Section ion of Corpora on Building	
	Tailahas	isee, FL 32314		Executive Cen	ter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNBRUST LAWN CARE LLC		· ·	
(Name of the Lin	ited Liability Company as it now appe (A Florica Limited Liability Company	cars on our records.)	· ········
The Articles of Organization for this Limited Florida document number L22000105514		03/01/2022	and assigned
This amendment is submitted to amend the fo			
A. If amending name, enter the new name	of the limited liability company	here:	
Sunburst Lawn Care LLC		·	
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or the abbrevia	ation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	S BOX)		
B. If amending the registered agent and registered agent and/or the new registered of		on our records, enter the	name of the
Name of New Registered Agent:	Joseph Lance Morgan		923
New Registered Office Address:	6600 Treasure Oaks Circle		L'B
	. Enter Fl	lorida street address	7
	Tallahassee	, Florida 32309.	<u>_0</u> c
	City	Zij	Code N
New Registered Agent's Signature, if changing	Registered Agent:	_	_ # <u></u>

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.

Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

o:		Page:	5	сf	6
υ.	•	rayo.	J	Ç.	C

MGR = Manager

2023	A2-16	14.2	14-33	DOT
LULU'	704 710) -	+→.33	F (3)

- 10	323	962	ĸЯЗ	ao

From: Amanda

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

AMBR = A	uthorized Member		
Title	Name	Address	Type of Action
			Add
			☐ Remove
			Change
			Add
			Remove
			☐ Change
			D Adc
		·	Renxove
			☐ Change
		-	Remove
			C Change
			D Add
			Remove
		• • •	
			□ Add
			☐ Remove
			☐ Change

				··	· · · · • · · · · · · · · · · · · · · ·	
						
					···· = · ····	
	· -· · · · · · · · · · · · · · · · · ·				<u> </u>	
				• •	 	
_						
					<u> </u>	·
			١			
	2.	.,				
						
				 	**	
	<u> </u>					· · ·
		·····				
-			·_			
	- <u></u>					
<u>ote:</u> If t	date, if other than the date is listed, the date inserted in this is effective date on the	s block does not n	icet the applicable:	statutory filing requ	rements, this date v	Pursuant to 605.020 All not be listed a
	d specifies a delay Oth day after the r		ate, but not an	effective time,	at 12:01 a.m. o	n the earlier (
ited	1 Februari	and.	3023			
		Signature of a r	nember of authorized	representative of a me	mber	
	•					

Page 3 of 3

Filing Fee: \$25.00