## L23000166890

(Requestor's Name)
(Address)
(Address)
(1881633)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Daywagat Musekas)
(Document Number)
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## **COVER LETTER**

Div	ision of Corp	orations				
SUBJECT:	Top Notch I	Lawn Care, LLC				
Name of Limited Liability Company						
The enclosed	Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspon	idence concerning this matter	to the following:			
		Kinsley Elfand				
			Name of Person			
		TOP NOTCH LAWN CA	RE, LLC			
			Firm/Company		<del></del>	
		1221 S WICKHAM ROA	D			
			Address			
		WEST MELBOURNE, F	TL 32904			
			City/State and Zip Code		-	
		kelfand@exclusivelandscap	•			
			to be used for future annual rep	ort notification)		
For further in	formation cor	ncerning this matter, please or	all:			
Kinsley Elfan	nd		407 625-8			
	Name of I	Person	Area Code	Daytime Telepho	ne Number	
Enclosed is a	check for the	following amount:				
□ \$25.00 Fi	lling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

Malling Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2024 OCT 23 ANIO: 55 COSHLINDY DE STATE

Samuel St.

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOP NOTCH LAWN CARE, LLC

(Name of the Limited I	inhility Company as it now appears on our records limited Liability Company)	_1
The Articles of Organization for this Limited Liabi Florida document number <u>L23000166890</u>	lity Company were filed on 01/01/2005	and assigned
This amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of the	e 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	<u></u>	
(Principal office address MUST BE A STREET A		
Enter new malling address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)		
THE POST OF THE PO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address he  Name of New Registered Agent:	ere:	
New Registered Office Address:		
	Enter Floridu street address	
<del>-</del>	Cuy , Flor	idaZip Conie
New Registered Agent's Signature, if changing Regis		ay Cale
I hereby accept the appointment as registered agorovisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the registery company has been notified in writing of this chains	nd complete performance of my duties, and ed agent as provided for in Chapter 605, F. stered office address. I hercby confirm that	I am familiar with and S. Or. if this docume of its the limited Hability 00 123
	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
President	Jon Moll	1221 S WICKHAM ROAD, WEST MELBOURNE	_ ≣Add
			_ □Remove
			Change
CFO	Daniel Doore	14131 Midway Rd., Suite 810 Addison, Texas 75001	_ i Add
			_ □Remove
			_ [] Change
			_ □Add
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Filing Fee: \$25.00