L23000243863

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SECRETARY OF SIAL



COVER LETTER

TO: Registration Se Division of Cor		·	
SUBJECT: Lar	nbert's Lawr Name of Lim	Maintenance, ited Liability Company	LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	William	D. Lambert Name of Person	
	<u>Lambert's</u>	Lawn Maintena,	nce, LLC
	_6252 Lak	e Drive Address	
	Starke, F	City/State and Zip Code	
	lamberts lawr E-mail address: (m @ gmail. Co	n ication)
For further information c	oncerning this matter, please ca	all:	
	<u>Lambert</u>	$\underbrace{\begin{array}{c} \text{at } (904) \\ \text{Area Code} \end{array}}_{\text{Area Code}} \underbrace{\begin{array}{c} 501 - \\ \text{Daytime} \end{array}}_{\text{Daytime}}$	3665 Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	☐ \$30,00 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)
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Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 5/17/23 and assigned Florida document number L23000243863. 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	Lambert's Lawn Mai	ntenance, LLC pany as it now appears on our records.) (Liability Company)	
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 "LLC." 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 regist agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	The Articles of Organization for this Limited Liability Company		and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "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 registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Florida	This amendment is submitted to amend the following:		
Enter new principal office 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 registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	A. If amending name, enter the new name of the limited lia	bility company here:	
(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 registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: New Registered Office Address: Florida Florida Florida	The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the ab	breviation "L.L.C."
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 registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	Enter new principal offices address, if applicable:		<u>e) </u>
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	(Principal office address MUST BE A STREET ADDRESS)	no charg	MA THE
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida		SSEE, TECK	9
Florida		address on our records, enter the nam	e of the new registered
		no Genter Florida street address	
			Zip Code

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	William D. Lambert	6252 Lake Drive	□Add
		Starke, FL 32091	□Remove
			XChange
			□Add
			□Remove
			□Change
	David E. Lambert	6252 Lake Drive	🗆 Add
		Starke FL 32091	Remove
			□Change
	Jennifer G. Lambert	6252 Lake Drive	□Add
		Starke, FL 32091	Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

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Tective date, if other than the date of filing:5/17/3	23 (optional)
an effective date is listed, the date must be specific and cannot be prior to dat ote: If the date inserted in this block does not meet the applicable s	te of tiling or more than 90 days after filing.) Pursuant to 605.0207
ocument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, a is filed.	at 12:01 a.m. on the earlier of: (b) The 90th day after the
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ated $\frac{5/25/23}{}$	
ated 5/25/23 4 3 condered	