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07/19/23--01021--013 **60.00

2020 JUL 19 PH 1: 22

COVER LETTER

Division of Corporations Jerry's Lawn Maintenance LLC SUBJECT: 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: Michelle Skipper Name of Person Firm/Company 1521 Sparrow Street Address Longwood, Fl 32750 City/State and Zip Code Auburn L.lp@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 407 967-3545 Michelle Skipper Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: S60.00 Filing Fee. ☐ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address:

TO:

Registration Section

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

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

2023 JUL 19 PH 1:22

Jerry's Lawn Maintenance LLC	11.1:22
(Name of the Limited Liability Company as it nov (A Florida Limited Liability Cor	y appears on our records,). upany)
The Articles of Organization for this Limited Liability Company were filed florida document number $\frac{6/30/23}{}$.	f on 6/26/23 and assigned
this amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	pany here:
he new name must be distinguishable and contain the words "Limited Liability Compan	y," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
.	
Inter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office address or gent and/or the new registered office address here:	our records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
	nter Florida street address
	F1'.1

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.

City

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

□Add ☑Remove □Change
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	nust be specific and cannot be prior to date of filing or more than 90 days after f block does not meet the applicable statutory filing requirements, this	iling.) Pursuant to 605.0207 (3)
he record specifies a delayed effec ord is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
July 16 Dated		
Michell	Signature of a member or authorized representative of a member	
	organitie of a member of authorized representative of a member	
Michelle Skipper		
	Typed or printed name of signee	