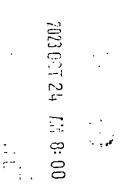
## 

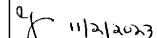
(Re	questor's Name)	<del></del>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
<b>\_</b>	,,	,
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
	_	<del></del>
	<del></del>	
Special Instructions to	Filing Officer.	





10/12/12/14/19/20-4025 \*\*\*30.00





### **COVER LETTER**

TO:	Registration Se- Division of Cor			
SUBJE	CT: <u>SPEARING</u>		HING AND BASIC LAWNCAR! nted Liability Company	E. LLC
The end	dosed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		Corpor	ate Maintenance Le	ead
			Name of Person	
		Proc	essing Department	
			Firm Company	
		1	450 Vassar St	
			Address	
			Reno, NV 89502	
			City State and Zip Code	<del></del>
		E-mail address: (	to be used for future annual report not	tication)
For fur	ther information co	oncerning this matter, please co	ıll:	
	Process	ing Department	at ( 800 ) 638-2320	
	Name of	Person		ne Telephone Number
Enclose	ed is a check for th	e following amount:		
☑ \$25	5.00 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

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301



### \*\*\*IMPORTANT NOTICE\*\*\*

PLEASE SEND ALL DOCUMENTS –
APPROVED OR REJECTED TO THE ADDRESS
BELOW.

# INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

TO:

PHYSICAL: Dept. of State Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

**Division of Corporations** 

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Monday, October 16, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

Articles of Amendment
 For: SPEARING N SON PRESSURE WASHING AND BASIC LAWNCARE, LLC

We have included payment in the amount of \$25.00 for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

## Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 OCT 24 AM 8: 00

#### SPEARING N SON PRESSURE WASHING AND BASIC LAWNCARE, 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 10/02/23 and assigned
Florida document numberL23000454920	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
<del>L23000-</del>	<del>154920-</del>
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8664 W Kimberly Ct
(Principal office address MUST BE A STREET ADDRESS)	Homosassa
	FL, 34448
Enter new mailing address, if applicable:	8664 W Kimberly Ct
(Mailing address MAY BE A POST OFFICE BOX)	Homosassa
	FL, 34448
Name of New Registered Agent:	<u>c</u> .
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 agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
If Cha	nging 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 Christopher Spearing	Christopher Spearing	8664_W_Kimberly_Ct	Add
		Homosassa	☐ Remove
		FL, 34448	☐ Change
			Remove
			Change
			Remove
			Change
			Remove
			□ Change
			□ Remove
			Change
			☐ Remove
			□ Change

). II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
	mer :
,	
,	
	·
•	
	· · · · · · · · · · · · · · · · · · ·
Note:	ive date, if other than the date of filing: N/A (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 ( If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the self-ective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
Dated	10/14/5
	Signifure of a member of authorized representative of a member
	Christopher Spearing
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00