

L24000236868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088
If there are any issues
please contact Patrice at
850-202-9071

Date: 07/22/2024

Name: Patrice Rush

Reference #: 2443753

Entity Name: RAINMAKER IRRIGATION AND LANDSCAPING LLC

☐ Articles of Incorporation/Authorization to Transact Business

☒ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion


☐ Merger



☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: 

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RAINMAKER IRRIGATION AND LANDSCAPING LLC

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:

Cynthia McDaniel

Name of Person

Moore & Van Allen PLLC

Firm/Company

100 N Tryon Street, Suite 4700

Address

Charlotte NC 28202-4003

City/State and Zip Code

hlamberton@yellowstonelandscape.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia McDaniel

at (704) 331-1000

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

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**

FILED

2024 JUL 23 AM 10:15

Rainmaker Irrigation and Landscaping LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/31/2024 and assigned
Florida document number L24000236868.

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 "L.L.C."

Enter new principal offices address, if applicable:

3235 North State Street

(Principal office address MUST BE A STREET ADDRESS)

Bunnell FL 32110

Enter new mailing address, if applicable:

PO Box 849

(Mailing address MAY BE A POST OFFICE BOX)

Bunnell FL 32110

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Corporation Service Company

New Registered Office Address:

1201 Hays Street

Enter Florida street address

Tallahassee

City

Florida 32301

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>	<u>Address</u>	<u>Type of Action</u>
MGR, CEO & President	Harry Lambertson	3235 North State Street, PO Box 849	<input checked="" type="checkbox"/> Add
		Bunnell, Florida 32110	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR & Executive Chairman	Tim Portland	3235 North State Street, PO Box 849	<input checked="" type="checkbox"/> Add
		Bunnell, Florida 32110	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR, Senior VP, Treasurer & Sec.	Chris Adornetti	3235 North State Street, PO Box 849	<input checked="" type="checkbox"/> Add
		Bunnell, Florida 32110	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR & CFO	Timothy Sherman	3235 North State Street, PO Box 849	<input checked="" type="checkbox"/> Add
		Bunnell, Florida 32110	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
Regional VP, Southeast Region	Rob Tetrault	3235 North State Street, PO Box 849	<input checked="" type="checkbox"/> Add
		Bunnell, Florida 32110	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Stephen C. King	36181 East Lake Road, #101	<input type="checkbox"/> Add
		Palm Harbor FL 34685	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2024 JUL 23 AM 10:13
STATE
TALLAHASSEE, FLORIDA

2024 JUL 23 AM 10:15
ALLIANCE: FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 7/22, 2024

Chris Edwards

Signature of a member or authorized representative of a member

Chris Adornetti

Typed or printed name of signee

Filing Fee: \$25.00