L25000256963

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SECRETARY A PARIC TALLAHASSEELF LORDA

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COVER LETTER

Tallahassee, FL 32314

	on Section f Corporations	
SUBJECT:	Logst Live Pest Management LLC Name of Finited Liability Company	د
The enclosed Artic	es of Amendment and fec(s) are submitted for filing.	
Please return all ec	respondence concerning this matter to the following:	
	Clayton Waggoner	، بر دا
	Firm-Company	
	5282 CYPRESS LN	•
	NAPLES FL 34113 City State and Zip Code Coastline Pest Management @ gmall E-mail address (to be used for future annual aport notification)	
For further inform	ion concerning this matter, please call;	
Clayto	Waggonca at (239) 462 - 7) 13 Area Code Daytime Telephone Number	
Enclosed is a chec	for the following amount:	
№ \$25,00 Filling	Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
_	ion Section Registration Section of Corporations Division of Corporations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City	, Florida Zip Code
New Registered Office Address:	Enter Florida st	eet address
Name of New Registered Agent:		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	i office address on our record	is, enter the name of the new registered
D. If we will be about it is a local way of a well-		
(Mailing address MAY BE A POST OFFICE BOX)		
Enter new mailing address, if applicable:		2
(Principal office address MUST BE A STREET ADDR	<u> </u>	
Enter new principal offices address, if applicable:		.,
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designa	tion "L.L.C" or the abbreviation "L.L.C."
A. If amending name, enter the new name of the limit	ted liability company here:	
This amendment is submitted to amend the following:		
Florida document number <u>L25000256</u>	ompany were filed on 1,63	and assigned
The Articles of Organization for this Limited Liability C	26	102/2015
(Name of the Limited Liabili	ty Company as it now appears on o Limited Liability Company)	
(pastline !	est Mana	ae ment LLC

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

Title MGR	Name Clayton Waggorch	Address 5282 Cypness LN NAPLES FL 34113	Type of Action
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			_ □ TAdd
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ote: If the date inserte	d in this block doe:	s not meet the app	licable statutory	or more than 90 days a filing requirements,	this date will not be listed
neument's effective dat	e on the Departme	nt of State's recor	ds.		
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