

Division of Corporations

M07000001377  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000053285 3))



H160000532853ABC/

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**\*RE-SUBMIT\***

To: Division of Corporations  
Fax Number : (850)617-6383  
From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)205-8842  
Fax Number : (850)878-5368

Please retain original filing date of submission 3/1

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

ATTN: Michelle Milligan

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
THE BRICKMAN GROUP LTD LLC

Certificate of Status	0
Certified Copy	1
Page Count	9507
Estimated Charge	\$55.00

\*\*Please file 2nd after BrightView Landscape, LLC withdrawal\*\*\*

2016 MAR -2 PM12:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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MAR 03 2016  
J. HARRIS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

16 MAR -1 AM 9:16

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### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Brickman Group Ltd. 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:

Carolyn Silva

\_\_\_\_\_  
Name of Person

The Brickman Group

\_\_\_\_\_  
Firm/Company

2275 Research Blvd. Suite 600

\_\_\_\_\_  
Address

Rockville, MD 20850

\_\_\_\_\_  
City/State and Zip Code

Carolyn.silva@brickmangroup.com

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

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



March 2, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION SYSTEM

**\*RE-SUBMIT\***

SUBJECT: THE BRICKMAN GROUP LTD LLC  
REF: M07000001377

Please retain original filing  
date of submission 2/1

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

You must adopt an alternate name for use in Florida if you are unable to obtain a letter or affidavit releasing the name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan  
Senior Section Administrator

FAX Aud. #: H16000053285  
Letter Number: 316A00004302

P.O BOX 6327 - Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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3/2/2016 11:35:45 AM From: To: 8506176383( 6/7 )

**BRICKMAN**  
Enhancing the American Landscape Since 1939

February 24, 2016

To Whom It May Concern,

My name is Carolyn Silva, and I am an authorized person for the following entities:

- BrightView Golf Maintenance, Inc.
- BrightView Landscape Development, Inc.
- BrightView Landscapes, LLC

I state that they will not use their name in the future.

Please do not hesitate to reach out with additional questions or concerns.

Very truly yours,  


Carolyn Silva, Authorized Person

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TALLAHASSEE, FLORIDA

2275 Research Blvd, Suite 600, Rockville, Maryland 20850 • Phone 240.683.2000 • Fax 240.683.2059 • www.brickmangroup.com

California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Illinois, Indiana, Kansas, Kentucky, Maryland, Massachusetts, Michigan, Minnesota, Missouri, New Jersey, New York, North Carolina, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Virginia, Washington, West Virginia, Wisconsin

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: The Brickman Group Ltd LLC

2. The Florida document number of this limited liability company is: M07000001377

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 03/08/2007

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: BrightView Landscapes, LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. 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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida Street Address*

\_\_\_\_\_, Florida \_\_\_\_\_  
*City 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: \_\_\_\_\_

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8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

*Gena Ashe*  
Signature of the authorized representative

Gena Ashe  
Typed or printed name of signee

Filing Fee: \$25.00

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# Delaware

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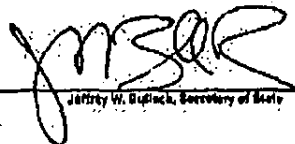
The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "THE BRICKMAN GROUP LTD. LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "BRIGHTVIEW LANDSCAPES, LLC" ON THE SIXTEENTH DAY OF FEBRUARY, A.D. 2016, AT 2:38 O'CLOCK P.M.



2823823 8320  
SR# 20160874656

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 201842638  
Date: 02-17-16