FEI Number: 81-1066043			Certificate of Status Desired: No	
Name and A	Address of Current Registered Age	nt:		
WELLS, HEATI 1378 N RAILRO CHIPLEY, FL	DAD AVE			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				
SIGNATURE: HEATHER WELLS				01/25/2020
	Electronic Signature of Registered Agent			Date
Authorized	Person(s) Detail :			
Title	CEO, PRESIDENT/MGR	Title	VP/MGR	
Name Address	BEASLEY, TODD PATTERSON OWNER PO BOX 418	Name	YOUNG, CARL LYLE OWNER	
		Address	PO BOX 90	
		City-State-Zip:	CHIPLEY FL 32428	

DOCUMENT# L16000001078

Entity Name: LANDCARE CONCEPTS, LLC

## **Current Principal Place of Business:**

1350 STATE PARK ROAD CHIPLEY, FL 32428

## **Current Mailing Address:**

PO BOX 418 CHIPLEY, FL 32428 US

## FE

City-State-Zip: CHIPLEY FL 32428

## Na

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TODD P. BEASLEY

PRESIDENT

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 25, 2020 **Secretary of State** 5486503565CC

Date