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COVER LETTER

Div	ision of Corpo	rations					
CID IFOT.	Premier Homo	e and Lawn LLC					
NOBSECT.		Name of Limi	ted Liability Company				
The enclosed	l Articles of Ar	mendment and fee(s) are subr	nitted for filing.				
Please return	all correspond	ence concerning this matter t	o the following:				
		Joseph Yolofsky					
			Name of Person				
		Yolofsky Law, P.A.					
		· · · · · · · · · · · · · · · · · · ·	Firm/Company		· · · · · · · · · · · · · · · · · · ·		
		100 SE 3rd Ave., Suite 100)()				
Address							
		Fort Lauderdale, FL 33394					
			City/State and Zip Co	de			
		ajy@yolofskylaw.com					
		E-mail address: (1	o be used for future annu	ial report notificati		5.5	<u>.</u> ,
For further it	iformation con	cerning this matter, please ca	11:			<u> </u>	-
Joseph Yolo	ifsk <u>y</u>		954 at ()_	237,4011		20 344 27	
	Name of P	erson	Area Code	Daytime Tel	ephone Number		ا برا چو
						- K	5::
Enclosed is a	i check for the	following amount:				7.	
■ \$25.00 F		S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fe Certified Copy tadditional copy is		☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		j. A

MAILING ADDRESS:

TO:

Registration Section

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, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our record	<u>ds.</u>)	
(A Fiorida Limited	that they company,		
The Articles of Organization for this Limited Liability Company	were filed on 9/17/2019	and assigned	
Florida document number L19000235181			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
Premium Home and Lawn LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		-	
(Principal office address MUST BE A STREET ADDRESS)		20	
		2	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		· ·	
maining data cas may be a rost of the boay			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		ls, <u>enter the name of the ne</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, FI	lorida	
	City	Zip Code	
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			

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Remove
			☐ Change
			Remove
			Change
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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this bedocument's effective date on the	block does not	t meet the app	licable statutor	ng or more than 9 y filing require	(optional) (days after filing ments, this date) Pursuant to 605.0 will not be listed	0207 d as
ne record specifies a delaye The 90th day after the re			not an effec	tive time, at	12:01 a.m.	on the earlie	r of
Dated		2020					
		11.1	110				
	Signature of	With The		mtative of a mem			

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