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COVER LETTER

	Registration Sec Division of Corp		•	
aun inc	GARDEN 2	020 LLC	•	
SUBJEC	.l: <u></u>	Name of Lim	ited Liability Company	
The encle	osed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspon	ndence concerning this matter	to the following:	
		FERNANDO VALEIRAS		
			Name of Person	
			Firm/Company	
		2155 KHASIA PT		
		NAPLES, FL 34119	Address	
For furth	er information co	ferva1914@gmail.com E-mail address: (oncerning this matter, please c	City/State and Zip Code to be used for future annual report notification)	
Fernando	o Valeiras		954 6085309 at ()	
	Name of	f Person	Area Code Daytime Telepho	one Number
Enclosed	l is a check for th	e following amount:		a.
■ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$60.00 Filing Egc. Certificate of Status & Certified Copy. (additional copy genclosed)
	Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, h	Section orporations 7	Street Address: Registration Section Division of Corporatio The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	ssec t, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GARDEN 2020 LLC (Name of the Limited Liability Company as It now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/31/2020}{1}$ and assigned Florida document number L20000269594 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 "L.L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address City

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.

New Registered Agent's Signature, if changing 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>	Name	Address	Type of Action
MGR	María de los Angeles Garcia	2155 KHASIA PT, NAPLES, FL 34119	= Add
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effective date is listed, the date must be	specific and cannot be pri	or to date of filing or n	nore than 90 days a	ifter filing.) Parsu	ant to 605.020
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march 25th	2021				
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	nature of a member or au	Lees			

Filing Fee: \$25.00