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TO:

Registration Section
Division of Corporations

Three Labs Lawn Care Services LLC SUBJECT: 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: Justin A Fuller Name of Person Three Labs Lawn Care Services LLC Firm/Company 10006 Cross Creek Blvd. #168 Address Tampa, FL City/State and Zip Code Justin@threelabslawn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Justin Fuller Name of Person Enclosed is a check for the following amount: **\$30.00** Filing Fee & □ \$60.00 Filing Fee. □ \$25.00 Filing Fee □ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Three Labs Lawn Care Services 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 May 01, 2023 and assigned Florida document number ______1.23000214094 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Three Labs Lawn & Landscape LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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: Three Labs Holdings LLC Name of New Registered Agent: 10006 Cross Creek Blvd. #168 New Registered Office Address: Enter Florida street address

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.

City

Tampa

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
AMRR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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effective date is listed, the date must e: If the date inserted in this bloument's effective date on the De	be specific and cannot be prior ck does not meet the applic	able statutory filing requ	an 90 days after filing.) Pursuant to	605,020 listed a
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January 19	2024			
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4,	Signature of a member or author			