Ta: 18506176383 From: 15615153904 Date: 07/07/23 Time: 4:29 PM Page: 01/05

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.

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The state of the s

· To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICE OF PAUL A. KRASKER P.A.

Account Number : 120090000078 Phone : (561)801-7312 Fax Number : (561)515-3904

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

Email Address: Admine USAMUN CALLE, COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN USA MULCH LLC

Contract and programmes in particular interest contract to the contract of the	A ST SUMMER WALLES CONCERN MORE LINES AS
Certificate of Status	0
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Estimated Charge	\$25.00

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#### **COVER LETTER**

	legistration Se livision of Cor			
Culping	USA MUL	CHILC		
SUBJECT	·:	Name of Lim	nited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	onitted for filing.	
Please retu	nn all correspo	ondence concerning this matter	to the following:	
		PAUL A. KRASKER, ESC	⊋.	
			Name of Person	
		THE LAW OFFICE OF PA	AULA KRASKER, P.A.	
			Firm/Company	
	1615 FORUM PLACE, 5TH FLOOR			
			Address	<del></del>
		WEST PALM BEACH, FL 33401		
		Admin@USAMulchile.com	City/State and Zip Code	
		<u>-</u> :	to be used for future annual report not	itication)
For further	information c	oncerning this matter, please ea	alt:	
Andrea Mi	irphy Snowde	n.	561 515-4722	
	Name o	(Person	at () Area Code Daytin	ne Telephone Number
Enclosed is	a check for th	e 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

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ş.

Street Address: Registration Section

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

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### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

USA MULCH LLC				
(Name of the Lin	nited Liability Compan (A Florida Limited L	iv as it now appears on ( lability Company)	our records.)	
The Articles of Organization for this Limited	Liability Company v	were filed on RINE I	2, 2023 and assig	gned
Florida document number 1.02000025113	···			-
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limited liabil	ity company here:		
The new name must be distinguishable and contain the	words "Limited Liabilit	ty Company," the designa	tion "LLC" or the abbreviation "L.L	.C."
Enter new principal offices address, if appl	icable:			3
Principal office address MUST BE A STRE	EET ADDRESS)			ن د
				-
				l l
Enter new mailing address, if applicable:		16575 Gator Road		70
(Mailing address MAY BE A POST OFFICE	E BOX)	Fort Myers, Florida 3	3912	
				الا، —بنت
				ਯ
<ol> <li>If amending the registered agent and/or igent and/or the new registered office addr</li> <li>Name of New Registered Agent:</li> </ol>	ess here:	ddress on our record of Paul A. Krasker, P.A		regis
	1615 Forum Place, 5th Floor			
New Registered Office Address:	1013 FURUIT PIAC	Enter Florida sir	ret address	<del> </del>
	West Palm Beach			
		Cin	, Florida 33401	

#### 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 can 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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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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

Title	Name	Address	Type of Action
MGR	BRIAN LULFS	16575 GATOR ROAD	
		FT. MYERS, FL 33912	□Remove
MGR	DESTAVEN, PHLIP JR.	16575 GATOR ROAD	
		FT. MYERS, FL 33912	①Remove
			□Change
MGR	Ricky Shultz	4307 Kingston Loop	DAdd
		Surasota, Fl. 34238	
			(1) (Thinge
- <del></del>			DAdd
			□Remove
			CiChange
<del></del>			
			□Remove
			ClChange
<del></del>			\ \pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			CRemove
			□Change

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A CRIMINAL HAS TREID TO	APPOINT UNKNOWN INDIVIDUALS AS MANAGERS IN AN ATTEMPT
TO DEFRAUD OTHERS, THE	RE IS NO RELATIONSHP WITH ANY PARTIES OTHER THAN BRIAN
LULFS AND PHILIP DESTAV	EN. JR., ALL UNKNOWN PARTIES WHO HAVE ATTEMPTED TO CHANGE
THE LISTED MANAGERS HA	VE NO INTEREST IN THE LLC AND SHOULD NOT BE RECOGNIZED.
ONLY BRIAN LULES AND PE	HILIP DESTAVEN, JR. ARE AUTHORIZED TO ACT ON BEHALF OF
THIS COMPANY.	
-	
effective date is listed, the date must be	te of filing:
ord specifies a delayed effective de filed.	ate, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day efter
10 10 10 10 10 10 10 10 10 10 10 10 10 1	2023
	nature of a member or authorized representative of a member
Sig	nature of a member or authorized representative of a member

Filing Fee: \$25.00

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