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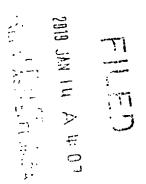
| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| 61:0407 | | stview Farm & Garden LLC | | |
| SUBJEC | L1: | Name of Lim | ited Liability Company | *************************************** |
| The encl | losed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please re | eturn all correspo | ondence concerning this matter | to the following: | |
| | | Carl E. Martin | | |
| | | | Name of Person | · · · · · · · · · · · · · · · · · · · |
| | | Martin Crestview Farm & | Garden LLC | |
| | | | Firm/Company | |
| | | 5570 Tom Page Ln | | 2013 121 111 |
| | | | Address | |
| | | Baker, FL 32531 | | = |
| | | 2MartinLandscaping@gma | City/State and Zip Code il.com | ication) |
| | | E-mail address: (| to be used for future annual report notif | ication) |
| For furth | ner information c | oncerning this matter, please co | all: | |
| Carl Ma | artin | | 850 546-0646 at () | |
| | Name o | t Person | Area Code Daytime | e Telephone Number |
| Enclosed | d is a check for t | he 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 radditional copy is enclosed) |
| | Registr | ING ADDRESS: ration Section on of Corporations | STREET/COURI Registration Section Division of Corpor | n |

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARTIN CRESTVIEW FARM & GARDEN 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 $\frac{12/01/2003}{1}$ and assigned Florida document number _____L03000050462 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: TWO MARTIN LANDSCAPING 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: Name of New Registered Agent: 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

| MGR = Mai AMBR = Aut | nager horized Member | | |
|-------------------------|-------------------------|---------|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| an effective date | is listed, the date e inserted in this | must be specifi | ic and canno | ot be prior to | date of filing o | r more than 90 | days after | tiling. |) Pursuant will not b | to 605,0200 |
| | ctive date on the | | | | e statutory t | iiiig requirei | nemo, uno | duic | Will HOLE | e noted at |
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00