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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Picture Perfect Landscaping, LLC (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:
Joshua M. Smith (Name of Person)
For further information concerning this matter, please call: Michelle Smith (Name of Person) (Firm/Company) ASE SAN 24 (Address) (Address) (Address) (Address) ASE AN 24 ASE AN 2
Enclosed is a check for the following amount: \$\int \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

PICTURE R PERFECT LANDSCAPING

Joshua M. Smith, President Picture Perfect Landscaping, LLC 3645 Okeechobee Circle Casselberry, FL 32707 January 17, 2008

To Whom It May Concern:

My name is Joshua M. Smith with Picture Perfect Landscaping, LbC, I recently sold the assets of my business, which included the righter my company name to Mr. Brian Marotta.

I have submitted the necessary amendment by mail today to perform name change for my LLC.

With that said, the purpose of this letter is to release the name "PEter = Perfect Landscaping LLC" to Mr. Brian Marotta. He holds the full Aghts to this name in order to run his business.

If you have any questions or need to contact me, please call me at 407-718-5412 or 407-718-5510.

Sincerely,
Joshua M. Smith, President
Picture Perfect Landscaping, LLC

3645 Okeechobee Circle Casselberry, Florida 32707



Phone: 407-718-5412
JoshuaMSmith1@yahoo.com

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

on

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	mager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter chang		FILED 2008 JAN PH P 2 H2 SEÉRETARY OF STATE
Dated	Folleling	mite	
	Joshua M	or authorized representative of a member SM H or printed name of signee Page 2 of 2	

Filing Fee: \$25.00