L04000055092

(R	equestor's Name)	
(A	ddress)	
(A:	ddress)	
(C	ity/State/Zip/Phon	e #).
PICK-UP	MAIT	MAIL
(B:	usiness Entity Nar	me)
(D	ocument Number)	1
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		Q.t
		114%
	_	CAOCO





900110337519

10/09/07--01005--017 **30.00

07 OCT -9 AM 9: 57
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

COVER LETTER

	ition Section of Corporations			
SUBJECT: L	NING ART LANDSC (Name of Li	APES LTD . CO . mited Liability Company)		
The enclosed Arti	cles of Amendment and fee(s) are s	ubmitted for filing.		
Please return all c	orrespondence concerning this matt	er to the following:		
	LES HUR	Name of Person)		
	LIVING ART L	(Firm/Company)	LLC	07 O
	1906 WOODES	ST DR (Address)		CT-9 A
	ormand BCH	City/State and Zip Code)		FILED 07 OCT -9 AM 9: 57 SECRETARY OF STATE FALLAHASSEE, FLORIDA
For further inform	nation concerning this matter, please	call:		>
	UBBELL (Name of Person)	at (<u>386) 233 - 1</u> (Area Code & Daytim	334 ne Telephone Number)	
Enclosed is a check	for the following amount:			,
☐ \$25.00 Filing Fe	e 'S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is en	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited Liability Company)			
FIRST:	The Articles of Organization were filed on 3.14 76 64 and assigned document number 64000055092		
SECOND:	This amendment is submitted to amend the following:		
	NAME CHANGE TO:		
	LIVING ART LANDSCAPES OF ORMOND LLC		
	·		
	07 O		
	FILED O7 OCT -9 AM 9: 57 SECRETARY OF STATE FLORID TALLAHASSEE. FLORID		
	72		
Dated <u>[</u>	2-1-07 ,		
	Signature of a member or authorized representative of a member		
	LES HUBBELL Typed or printed name of signee		

Filing Fee: \$25.00