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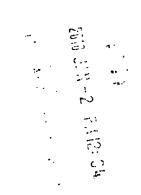
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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Cra	eative Home Name of Lin	c and Garder	Systems LLC
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Richard	Perry Lamb	
	Creative -	firm/Company	rden Systems LLC
	7624 +	Firm/Company Wy 441 5E Address	
	$\nu \sim \nu \sim 1000$	10/2/ 1-1 (3)	4917
	\sigma_	City/State and Zip Code Ond U.S. ma to be used for future annual report notifi	il
For further information	concerning this matter, please c	·	
Mollie La	Cmb Brown of Person	at (<u>863</u>) <u>L10</u> – Area Code Daytime	7516 Telephone Number
Enclosed is a check for	the 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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Creative Home and Garden Systems LLC

(A Florida Limited L	iability Company)	(ecorus.)
The Articles of Organization for this Limited Liability Company of Florida document number	were filed on <u>Feb</u>	8, 2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	"LLC" or the abbreviation "L.L.C."
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 off registered agent and/or the new registered office address here	fice address on our re	Cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	_	
I hereby accept the appointment as registered agent and agre		

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

iΩ

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

$ \dot{M}GR = M $ $ AMBR = A $	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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