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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration S Division of Co			
SURJECT: Landsca	ape & Lawn Care Satisf	action LLC	
		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Mr. Wilfredo Ortiz Jr.		
		(Name of Person)	
	Landscape & Lawn (Care Satisfaction LLC	
	•	(Firm/Company)	
	626 Sarita Street		
		(Address)	
	Sanford, FL 32773		
		(City/State and Zip Code)	**************************************
For further information of	concerning this matter, please c	all:	
Sabrina Ramos		at (321) 695-2201	
(Name	of Person)	(Area Code & Daytime	Felephone Number)
Enclosed 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 (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 OF



Landscape & Lawn Care Satisfaction LLC
(Name of the Limited Liability Company as it now appe

(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 I	Liability Company were filed or	n 04/26/2007 and assigned
Florida document number <u>L07000044306</u>	.	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability compan	<u>y here</u> :
"L.L.C."	or registered office address	company," the designation "LLC" or the abbreviation on our records, enter the name of the new
Name of New Registered Agent:	Ms. Sabrina Ramos	
New Registered Office Address:	4409 Stone Meadow D	Drive
		(Enter Florida street address)
	Orlando	, Florida <u>32826</u>
	(City)	(Zip Code)

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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Ms. Sabrina Ramos	4409 Stone Meadow Drive Orlando, FL 32826	✓ Add Remove
MGR_	Mr. Wilfredo Ortiz	626 Sarita Street Sanford, FL 32773	Add Remove
			Add Remove
			Add Remove
			Add Remove
	**		Add Remove
		change(s) here: (Attach additional sheets, if necessary.)	
Add	l Employer Tax Identificatio	n Number: 26-1820294	_
_			
Dated Janua	rv 24th	2008	
-	Wilher St	member or authorized representative of a member	·
ı	Mr. Wilfredo Ortiz Jr.	nginosi oi addiorized representative of a member	
-		Typed or printed name of signee	

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Filing Fee: \$25.00