LD7000101204

	(Requestor's Name)
	(Address)
•	(Address)
2 2	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
- · · · · ·	•
Special Instruction	s to Filing Officer.
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Office Use Only



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D. BRUCE

COVER LETTER

	ration Section on of Corporations		•			
SUBJECT:	ALLIANCE	LANDSCAT	E MANI	AGEMENT	r, uc	_
The enclosed A	rticles of Amendmen		ed Liability Comp	pany		
Please return all	correspondence con	cerning this matter	to the following:	٠	·	
		ROBERT ?	Names F15			_
		ALLIANCE	LANDSCA - Firm/Compa		Atem ENT,	LLC
	·	391 BA	RD ROAD Address	·		_
	V	ENICE,		1293	·····	7 - 6
			City/State and Zi	T. NET	tification)	
For further info	rmation concerning t	•	\		, .	
ROBERT	Name of Person	scitel	at (<u>94)</u>) 586 - 3 trea Code & Dayti	348 ime Telephone Num	ber
Enclosed is a cl	neck for the following	g amount:		٠		
\$25.00 Filin		Filing Fee & tificate of Status	\$55.00 Filin		Certif	Filing Fee, icate of Status & ied Copy
			(auditiona	n copy is choics		ional copy is enclosed)
	MAILING ADDI Registration Section Division of Corpo P.O. Box 6327 Tallahassee, FL 33	on rations	·	STREET/COUI Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALLIANCE LANDSCAPE MA	INACEMENT, LLC
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company w	ere filed on 10/3/2007 and assigned
Florida document number <u>Lo7000101204</u>	•
	,
This amendment is submitted to amend the following:	· · · · · · · · · · · · · · · · · · ·
A. If amending name, enter the new name of the limited liabili	ty company here:
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	391 BARD ROAD 👸 3
(Principal office address MUST BE A STREET ADDRESS)	VENICE, FZ 34293 5 79
Enter new mailing address, if applicable:	391 BARD ROAD
(Mailing address MAY BE A POST OFFICE BOX)	VENICE, FZ 3429
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here	
Name of New Registered Agent: RoBE	RT JAMES FISCHER
New Registered Office Address: 391	BARD ROAD
VER	JIC2 Florida Street address JIC2 , Florida 34293
	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 Type of Action Address -Title : Name . Mdd ROBERT JAMES FSCITCR Remove LISA MICHELE. FISCHER SEC Add BARD Remove 1165 VEREDA VERDE LEE VINGATE SARASOTA FL 34232 Kemove AMY V. WINGATE 1165 VEREDA VERDE SARASDIA, FL 34232 □Add Remove $\square \land dd$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member of authorized representative of a member. Typed or printed name of signee -

Page 2 of 2

Filing Fee: \$25.00