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(Cit	y/State/Zip/Phone	e #)	
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MAY 3 0 2008

**EXAMINER** 



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05/29/08--01018--014 \*\*25.00

08 MAY 29 PM 2: 39

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: LAWN AND LANDSCAPE SERVICE OF SOUTH FLORIDA, 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:

	JUANA PUMAROL				
		(Name of Person)			
	LAWN AND LANDSCAPE SERVICE OF SOUTH FLORIDA, LLC				
		(Firm/Company)	-		
	8520 SW 27TH PLACE				
		(Address)			
	DAVIE, FL 33328				
		(City/State and Zip Code)			
•	concerning this matter, please c				
Romaine Brown, Esqu		at ( 954 ) 880-0159			
Enclosed is a check for t	of Person)  he following amount:	(Area Code & Daytime 1	elephone Number)		
☑ \$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)		

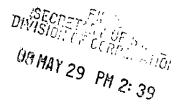
**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LAWN AND LANDSCAPE SERVICE OF SOUTH FLORIDA, LLC

( <u>Name of the Limited Liah</u> (A Flor	ility Compar ida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liabili Florida document number L07000127661	ty Company	were filed on DECEMBER 28, 2007 and assign	gned
This amendment is submitted to amend the following	g:	•	
A. If amending name, enter the new name of the	limited liab	ility company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limi	ited Liability Company," the designation "LLC" or the ab	breviation
Enter new principal offices address, if applicable:		8520 SW 27TH PLACE	
(Principal office address MUST BE A STREET ADDRESS)		DAVIE, FL 33328	
Enter new mailing address, if applicable:		8520 SW 27TH PLACE	
(Mailing address MAY BE A POST OFFICE BOX)		DAVIE, FL 33328 .	
registered agent and/or the new registered office		_	the new
Name of New Registered Agent.		<del></del>	
New Registered Office Address: 85	520 SW 27T		
		(Enter Florida street address)	
Di	AVIE	Florida 33328	

## 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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

(Zip Code)

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>	<u>Address</u>	Type of Action
MGR_	JUANA PUMAROL	8520 SW 27TH PLACE DAVIE, FL 33328	Add Remove
MGR	MICHAEL ROBAINA	4981 SW 94TH TERRACE COOPER CITY, FL 33328	Add Remove
			Add Remove
D. If a		er change(s) here: (Attach additional sheets, if necessary.)	
		PUMAROL. ADDRESS OF CORPORATION HAS ALSO	
		TH PLACE, DAVIE, FL 33328 PURSUANT TO FILING TE OF FLORIDA ON MAY 22, 2008.	<del></del>
			<del></del>
Dated N	MAY 23	, 2008	
	_	a member or authorized representative of a member	
	JUANA PUMAF	Typed or printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00