108000009126

(Requestor's Name)				
(Address)				
(Address)				
(1.001000)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Boodinest Humber)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
.				

Office Use Only



000118106290

02/18/08--01033--005 **25.00

2000 FEB | 8 AM 10: 55

T. CLINE

FEB 19 2008

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: PICTURE	PERFECT LANDSC	APING OF CENTRAL FLORI	DA, LLC
		nited Liability Company)	
The enclosed Articles of A	mendment and fee(s) are sub	bmitted for filing.	
Please return all correspon	dence concerning this matter	r to the following:	
	Erik C. Larsen		
		(Name of Person)	
		(Firm/Company)	
	243 W. Park Avenue	· · · · · · · · · · · · · · · · · · ·	
		(Address)	
	Winter Park, FL 327	· · · · · · · · · · · · · · · · · · ·	
	•	(City/State and Zip Code)	
For further information co	ncerning this matter, please of	call:	
	· · · · · · · · · · · · · · · · · · ·		TALL TALL
Erik C. Larsen (Name of	Person)	at (407) 647-2011 (Area Code & Daytime	
,	,		ASSI
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	\$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
MAIL I	NC ADDDESS.	STREET/COURIER	O ADDDECC.
MAILING ADDRESS: Registration Section		Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporati Clifton Building	
Tallahassee, FL 32314		2661 Executive Cente Tallahassee, FL 3230	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

PICTURE PERFECT LANDSCAPING OF CENTRAL FLORIDA, LLC (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 Liabi	lity Company were filed on 01/25/2008	and assigned	
5			
Florida document number <u>L08000009126</u>	•		
	. •		
This amendment is submitted to amend the following	ng:		
A 10 1'	- Marie at Markiller, annument home		
A. If amending name, enter the new name of th	e umited hability company nere:		
The new name must be distinguishable and end with the	ne words "Limited Liability Company," the desi	ignation "LLC" or the abbreviation	
"L.L.C."		2008 SEC	
		T T T	
B. If amending the registered agent and/or	registered office address on our records		
registered agent and/or the new registered office	e address here:	γ	
		m -	
		71 ^{TI} IIC ,	
		25 ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ±	
Name of New Registered Agent:		- 2 개 성	
New Registered Office Address:		TI≫	
Now Registered Child Hadres.	(Enter Florida street address)		
		lorida(Zip Code)	
	. (City)	(Zip Code)	
New Registered Agent's Signature, if changing Reg	istered Agent:		
I hereby accept the appointment as registered a	gent and agree to act in this capacity. I fi	ırther agree to comply with	
the provisions of all statutes relative to the prop	per and complete performance of my dutie	es, and I am familiar with and	
accept the obligations of my position as registe	red agent as provided for in Chapter 608,	F.S. Or, if this document is	
being filed to merely reflect a change in the reg	istered office address, I hereby confirm th	nat the limited liability	
company has been notified in writing of this che	ange.		
	(If Changing Registered Agent, Signature	e of New Registered Agent)	
	(TE CARRESTAND TACESTAND OF THE PROPERTY OF TH		

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
mgrm_	Willie Paredes	9136 Woodbridge Oak Terrace Orlando, FL 32825	✓ Add Remove
			Add Remove
			Add Remove
···	·		Add Remove
			Add Remove
			Add Remove
D. If amer —	nding any other information, enter cha	nge(s) here: (Attach additional sheets, if necessar	B 18 AH 10: 56
_			
Dated	Feb 15, &	008.	Just)
	Signature of a memb	per or authorized representative of a member Willie Para	
	Brian J. Marotta	ador printed name of signer Willie Par	005

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00