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T. CLINE

DEC 23 2008

EXAMINER.

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Grasshopper Landscape : Design, L.L. C. (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:
W. Jasen Kane (Name of Person)
130 · (Firm/Company)
1300 Dr. M. L. King St. St. N. (Address)
St. Peterstury, FL 33705 (City State and Zip Code)
For further information concerning this matter, please call: A Ser Concerning this matter, please call:
Enclosed is a check for the following amount: \$\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(additional copy is enclosed) (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**

/ / /

(Name of the Limited	A Scape CMA DESIGN Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited L Florida document number L 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	iability Company were filed on Naember 10, 2008 and assigned
This amendment is submitted to amend the foll	owing:
A. If amending name, <u>enter the new name o</u>	f the limited liability company here:
The new name must be distinguishable and end wi 'L.L.C."	th the words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applic	able:
Principal office address MUST BE A STREE	ET ADDRESS)
Enter new mailing address, if applicable: "Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/ registered agent and/or the new registered of	or registered office address on our records, enter the name of the new ffice address here:
Name of New Registered Agent:	William Jasen Kane
New Registered Office Address:	1300 Dr. M. L. King Jr. St. N. (Enter Florida street address)
	(City) O M. L. King Jr. St. N. (Enter Florida street address) (Enter Florida street address) (Zip Code)
New Registered Agent's Signature, if changing I	

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Ma	naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGRM</u>	William Strenkane	1300 Dr. M. L. King Jr. St. N. 1300 Dr. M. L. King Jr. St. N.	Add Remove
MGRM	Kane Capital, LLC	1300 Dr. M. L. King Jr. St. N St. Petersbry FL 33705	Add Remove
			Add Remove
			Add Remove
<u>_</u>			Add Remove
D. If amendir	ng any other information, enter change(s		Add Remove 2 PH 12:
			PM 12: 18 OF STATE
			_ _
Dated <u>Dec</u>	enlen 19, 200	<u>8</u> .	-
7	William Jasukas	rauthorized representative of a member	
<u> </u>	William Jasen Kane	printed name of signee	
	1 41560 01	DITTION HAITE OF STELLO	

Page 2 of 2

Filing Fee: \$25.00