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Florida Department of State
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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : TRIAD PROFESSIONAL SERVICES, LLC
 Account Number : I20020000094
 Phone : (770)777-2091
 Fax Number : (770)220-1943

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UNITED TURF CARE, LLC

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FEB 22 2013

EXAMINER
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UNITED TURF CARE, 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:

Sharon K. Gray

Name of Person

Triad Professional Services, LLC

Firm/Company

1720 Windward Concourse, Ste. 390

Address

Alpharetta, GA 30005

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon K. Gray

770 777-2091

at ()

Name of Person

Area Code & Daytime Telephone Number

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
(additional copy is enclosed)

\$60.00 Filing Fee,
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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

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**UNITED TURF CARE, LLC
AMENDED AND RESTATED ARTICLES OF ORGANIZATION**

Pursuant to the provisions of Section 608.411 of the Florida Statutes, this Florida limited liability company adopts the following Amended and Restated Articles of Organization, effective as of the date set forth below, which are intended to amend, restate and supersede the Articles of Organization of the Company filed with the Secretary of State of the State of Florida on March 10, 2010, as amended:

**ARTICLE I
NAME**

The name of the Company is United Turf Care, LLC (the "Company").

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**ARTICLE II
ADDRESS**

The mailing and street address of the principal place of business of the Company is:

1408 East Robinson Street
Orlando, FL 32801

**ARTICLE III
REGISTERED OFFICE AND AGENT**

The name and street address of the registered agent of this Company is Paracorp Incorporated, 236 E. 6th Avenue, Tallahassee, Florida 32303.

**ARTICLE IV
MANAGEMENT**

The Company is to be managed under the direction of a Manager and is, therefore, a manager-managed company.

**ARTICLE V
MANAGERS**

The following person is appointed as Manager of the Company to serve until his earlier resignation, removal from office or death:

Christian Engelmann
1408 East Robinson Street
Orlando, FL 32801

**ARTICLE VI
FEDERAL EMPLOYER IDENTIFICATION NUMBER**

The federal employer identification number of the Company is 80-0559932.

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SECRETARY OF STATE
DIVISION OF CORPORATION

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IN WITNESS WHEREOF, the undersigned person has executed these Amended and Restated Articles of Organization this 13 day of February, 2013.



Christian Engelmann, Authorized Representative

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