

L11000036047

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FILE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bloom Nursery 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:

Name of Person  
Maria Bigio  
Firm Company  
750 SW 174 Terrace  
Address  
Pembroke Pines FL 33029  
City/State and Zip Code  
bloomnurserysales@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Bigio 954 822-4096  
Name of Person at (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, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

2023 OCT 11 PM 2:08

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

Bloom Nursery 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 Liability Company were filed on March 25, 2011 and assigned  
Florida document number 111000036047.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

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 605, 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**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 6, 2023

Signature of a member or authorized representative of a member

SANTIAGO SCORT

Typed or printed name of signee

**Filing Fee: \$25.00**

RESOLUTION OF BLOOM NURSERY, LLC.

(Change in Membership)

WHEREAS, on the 6<sup>th</sup> day of **November, 2023**, at the scheduled meeting of the **Member(s)** the secretary, then called the role of the Members of the above named Limited Liability Corporation. The Member(s) in attendance at the meeting to which a quorum was present were:

**SANTIAGO SCORT**

The undersigned, being a **Member** of **Bloom Nursery, a Florida Limited Liability Company**, hereby affirm that by unanimous vote on this date, the Member(s) hereby authorizes and empowers Diego Scort to receive membership interest from Santiago Scort for \$ 20 and for the other good and valuable consideration for Diego Scort's loyalty to the company. The undersigned is directed to issue a member certificate to Diego Scort and amend the organization agreement accordingly.

These powers are in full force and effect and have not been rescinded or modified.

RESOLVED: That this resolution in the form presented to the undersigned Member(s) are hereby approved and adopted and shall be filed in the minute book

\_\_\_\_\_  
Date

  
Santiago Scort

Member/Secretary