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SECRETARY OF STATE
SECRETARY OF FLORID.

COVER LETTER

Division of Corporations
SUBJECT: Superior landscapes & Garden Center, 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:
Gregory B. Lord, Jr. Name of Person
Firm/Company
174 Patriot Lane Address
EIKton, FL 32033 City/State and Zip Code
Superior orders 1 @ vahoo. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gregory B. Lord Jr. at 904 1687-4747 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount: \$\Begin{align*} \$\sum_{\cun_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\cun_{\cun_{\cun_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\cun_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\sum_{\cun_{\sum_\sum_{\sum_\sum_\sum_\sum_\sum_\sum_\s\sum_\sum_
\$25.00 Filing Fee \$\$30.00 Filing Fee & \$\$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$\$Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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**

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Spenor	andscap	es & Gar	den Cen	ter Fr	2
(Name of the Limite	d Liability Company A Florida Limited Liab	as it now appears on o pility Company)	<u>ur records.</u>)		
The Articles of Organization for this Limited Lia		ere filed on IO	5/2012	and assig	gned
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liabilit	y company here:			
The new name must be distinguishable and contain the wo	ords "Limited Liability	Company," the designate	tion "LLC" or the a	bbreviation "L.L	.C."
Enter new principal offices address, if applica	ible: .			<u> </u>	
(Principal office address MUST BE A STREET	Γ <i>ADDRESS</i>)	· · · · · · · · · · · · · · · · · · ·			Marie Tolkinson
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	3 <i>0X</i>) .		\$ E	TARY OF STATE	
B. If amending the registered agent and/or the new registered off		ce address on our	records, enter	the name o	f the nev
Name of New Registered Agent:	Gregor	y B. Lo	rd, fr		
New Registered Office Address:	174 -	Fatriot Enter Florida str	tane reet address	=	
	EIKtor	City	, Florida	32033 Zip Code	>
New Registered Agent's Signature, if changing R	egistered 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Au	thorized Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	Tonny Outley	5250 Cypress Links	Blud Add
	•	5250 Cypress Links Elkton FL 32033	Remove
			☐ Change
			☐ Remove
			Change
			Remove
			□ Change
			□ Add
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	AND THE RESIDENCE AND ADDRESS OF THE PROPERTY		AM ION OF STATE OF ST
			P □ Remove
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The state in the s		- 	Add
			Remove
			□ Change

/ MOKIN	operon	1 B Lorg	1, <u>\r.</u>	
MGRM (New address)) 174 P	atriot Ln	\	_
,	EIKton	FL 320	33	
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ffective date, if other than an effective date is listed, the date	must be specific and canno	t be prior to date of filing	or more than 90 days after	onal) r filing.) Pursuant to 605.0207
ocument's effective date on the			iling requirements, thi	s date will not be listed as
		but not an effectiv	e time, at 12:01	a.m. on the earlier o
				TASE 15
e record specifies a dela The 90th day after the	record is filed.			100
The 90th day after the	record is filed.			
The 90th day after the	record is filed.			JUL 20 ECRETAS
	record is filed.			JUL 20 AM IO: 1-7 CRETARY OF STATE CRETARY SEE FI ORIE

Page 3 of 3

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