# L12000155178

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## COVER LETTER

TO: **Registration Section Division of Corporations** GULF COAST HARDSCAPE & LANDSCAPING 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: Noel Brown Name of Person **NTB Services LLC** Firm/Company 1080 Knotty Pine Ave Address North Port, FL 34288 City/State and Zip Code affordablecorp@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Noel Brown** Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount:

□\$55.00 Filing Fee &

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(additional copy is enclosed)

### **MAILING ADDRESS:**

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■ \$25.00 Filing Fee

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

### STREET/COURIER ADDRESS:

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Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gulf Coast Hardscape &  (Name of the Limited Liability Compar (A Florida Limited L	Landscaping LLC  ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L12000155178</u>	were filed on 12/12/2012 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	21027 Tucker Ave
(Principal office address MUST BE A STREET ADDRESS)	Port Charlotte,FL
	33954
Enter new mailing address, if applicable:	21027 Tucker Ave
Mailing address MAY BE A POST OFFICE BOX)	Port Charlotte,FL
	33954
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	AR A
	Enter Florida street address $\omega$
<del></del>	City Florida Cota
New Registered Agent's Signature, if changing Registered Agent:	DRIO.

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 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>		Type of Action
MGRM	Arnaldo Magazzeni	1105 Gulf Coast Blvd	Add
		Venice, FL	Remove
		34285	_
			Add
			Remove
<del></del>			Add
			Remove
			Add
			Remove
		Äo Eu	2013
		AHD S	Addil Addil
		Sign Sign Sign Sign Sign Sign Sign Sign	Remove
		F FLORIDA	7:28
			Add
			Remove

JANUARY 24	2013
(X) Analde	Mayeyye a member of authorized representative of a member
Signature of	a member of authorized representative of a member  Magazzeni / Mgam - Gulf Coast  Typed or printed name of signee Hardscape + /as  Page 3 of 3

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SECRETARY OF STATE
TALLAHASSEE FLORIDA