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SECRETARY OF STATE OF STATE OF CORPORATIONS

'JUL' 8 2013

T. HAMPTON

COVER LETTER

	00 / ER 221121
Registration Section Division of Corporation	ons
SUBJECT: Cathy	5 Consulting Construction LLC Name of Limited Liability Company
The enclosed Articles of Amend	ment and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to the following:
,	Cathy Venezia Name of Person Cathy's Consulting Construction LLC Cathy's Firm/Company Candscaping LC 3925 W. Bay Vista Ave. Address
For further information concern	Tampa, FL 3361 City/State and Zip Code Cvenezia 9 9 mail · Com E-mail address: (to be used for future annual report notification) ing this matter, please call: at (813) 363-4120
Name of Person	The second secon
· · · · · · · · · · · · · · · · · · ·	

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/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 Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

	m. 1. 1/1/12	
The Articles of Organization for this Limited Liability Company v	were filed on $\frac{\omega / 4/L5}{}$	and assigned
Florida document number <u>413000 81349</u> .	, .	
This amendment is submitted to amend the following:		S TAPE
This amendment is submitted to amend the following.		P 022
A. If amending name, enter the new name of the limited liabil	ity company here:	:- ST/ ORA
Cathyls Landscaping LLC	-	110NS
The new name must be distinguishable and end with the words "Limite "L.L.C."		
Enter new principal offices address, if applicable:	_ 3925 W Bar _ Tampa, FC	y Vista Ave.
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FC	3361
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
TO TO 11 45 14 14 14 14 14 15 16 16 16 16 16 16 16 16 16 16 16 16 16	11	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		er the name of the new
Total Control of the second of	_	
0.1	h (0.07.0	
Name of New Registered Agent:	ny venezia	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address: 3923	5 W Bay Vista A.	<u> 1e</u> .
• •	Ehter Florida street	address
Tan	1 <i>PA</i> , Florida	3361/
·	' 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 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 **Title Name Address Type of Action** Add Remove Add Remove Add Remove Add Remove Add

Remove

. *	• •
<u></u>	
	June 24, 2013.
	1 + 1/20 is
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00

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