## 3000 104 18

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



300270190063

03/05/15--01023--014 \*\*30.00

MAR 2 4 2015 C. CARROTHERS

## COVER LETTER

TO: Registration S Division of Co	
Botanic SUBJECT:	cs Design Group LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.
Please return all corresp	pondence concerning this matter to the following:
	Michael Brandon Duke
	Name of Person
	Botanics Design Group, LLC
	Firm/Company
	3027 Via San Marco Ct
	Address
	Fort Myers, FL 33905
	City/State and Zip Code
	Brandon@juniperlandscaping.com
	E-mail address: (to be used for future annual report notification)
For further information	concerning this matter, please call:
Brandon Duke	239 561-5980
Name	of Person Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:
□ \$25.00 Filing Fee	■\$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  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

Botanics Design Group LLC

Botamoo Boolgh Group EEO
(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 07/23/2013  Florida document number L13000104104  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 end with 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 ne registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida
, Florida
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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> <u>Address</u> Type of Action Robert Melzer MGRM 2100 Burton Ave \_ Add Fort Myers, FL 33907 ■ Remove MGR Joseph H Kelley 3805 Hanover St Add Fort Myers, FL 33901 ☐ Remove □ Add ☐ Remove ☐ Add \_\_\_\_\_ Remove \_\_\_\_ Add ☐ Remove □ Remove

. If amending any other information, enter c	change(s) here: (Attach additional sheets, if necessary.)
-	
Effective date, if other than the date of filin	02/04/2015 (optional)
(The effective date must be specific, cannot be prior to d the date this document is filed by the Florida Departme	late of receipt or filed date and cannot be more than 90 days after
February 4	2015
Dated Tebruary 4	., ——.
	2
Signature of a	nember or authorized representative of a member
Michael Brandon Duke	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00