*L 13000151041

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13 DEC 20 PM 2: 27
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MIT MINSSEE FLORID

K. SALY EXAMINER DEC 2 6 2013

COVER LETTER

subject: <u>B</u> a	Name of Limit	and scape LLC ed Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	William	Kodade K Name of Person	
	Bayside Law	n and Landscape LLC Firm/Company	
	4100 W Walla	ce Avenue Address	
	Tampa, FL	33611 City/State and Zip Code	
SUBJECT: Bayside Lawn and Landscape LLC Name of Limited Liability Company The enclosed Articles of Amendment and five(s) are submitted for filing. Please return all correspondence concerning this matter to the following: William Kodadek Name of Person Bayside Lawn and Landscape LLC Firm/Company 4100 Wwallace Avenue Address Tampa, FL 33611 City/State and Zip Code WKodadek C Yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William Kodadek Name of Person Area Code & Daytine Telephone Number Enclosed is a check for the following amount: X \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate Copy Certificate Of Status Certificate Of Status			
For further information			
William	Kodade K e of Person	at (813) 992-0305 Area Code & Daytime To	8 Elephone Number
Division of Corporations SUBJECT: Bayside Lawn and Landscape LLC Name of Limited Liability Company The enclosed Articles of Amendment and fie(s) are submitted for filing. Phase return all correspondence concerning this matter to the following: William KodadeK Name of Person Bayside Lawn and Landscape LLC Finu/Company 4100 W Wallace Avenue Address Tampa, FL 33611 City/State and Zip Code WKodadeK C Yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William KodadeK Name of Person Area Code & Dayrine Telephone Number Enclosed is a check for the following amount: \$255.00 Filing Fee			
X \$25.00 Filing Fee	-	Certified Copy	Certificate of Status &

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

13 DEC 20 PM 2: 27 **OF** BAYSIDE LAWN AND LANDSCAPE LLC

(<u>Name of the Limited Liabi</u> (A Flori	lity Company as it now appears on our recordance Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Florida document numberL13000151041	y Company were filed on	•
		
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the L	imited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words 'Limited Liability Company,'' the design	nation 'LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office a		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
	, Flor	
	Ciņ	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent and agree to act in this capacity. Ifurther 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 Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
MGRM	Jennifer L. Kodade K	4100 W. Wallace Avenue	Add
		Tampa, FL 33611	Remove
			Add
			Remove
			Remove
-			Add
			Remove
			Add
			Remove
			Add
			Remove

ed	December 15th, 2013.
	Signature of a member or authorized representative of a member
	William Lee KodadeK Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

. If amer	nding any other information	enter change(s) here: (Attach additional sheets, if necess	sary.)	
_				
_				
_				
	*			
_				
ited	DECEMBER 17	, <u>2013</u>		
	Signature of a member or authorized representative of a member			
	PEDRO MAGGI			
	Typed or printed name of signce			

Page 3 of 3

Filing Fee: \$25.00