

A large, dense, black and white image showing a close-up of a textured surface, possibly a book cover or a piece of fabric, with a grid-like pattern. The image is very dark and blurry, with a prominent vertical line running down the center, suggesting a fold or a seam. The overall appearance is abstract and high-contrast.

10/31/16--01027--003 **30.00

K. SALY
NOV - 1 2016

FILED
2016 OCT 31 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MM & SON LANDSCAPING LL
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:

DEVORA CRUZ

Name of Person

AMBAR FINACIAL SERVICES

Firm/Company

1897 PALM BEACH LAKES BLVD S-223

Address

WEST PALM BEACH FL 33409

City/State and Zip Code

DEVORACRUZ@BELLSOUTH.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEVORA CRUZ at 561 779- 8027
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

MM & SON LANDSCAPING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2016 OCT 31 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/11/2014 and assigned
Florida document number L14000041227.

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 contain 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)

29 PICKWICK DR E LOT 129

GREENACRES FL 33463

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

29 PICKWICK DR E LOT 129

GREENACRES FL 33463

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

AMBAR FINANCIAL SERVICES

New Registered Office Address:

1897 PALM BEACH LAKES BLVD S-223

Enter Florida street address

WEST PALM BEACH

City

Florida 33409

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 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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ERAIZY ALVAREZ	2643 FORIDA NST	<input type="checkbox"/> Add
		WEST PALM BEACH FL 33406	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	YOSVANY MOREJON MR	2643 FORIDA NST	<input type="checkbox"/> Add
		WEST PALM BEACH FL 33406	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LOTARIO PEREZ	29 PICKWICK DR E LOT 129	<input checked="" type="checkbox"/> Add
		GREENACRES FL 33463	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LURENI PEREZ RODRIGUEZ	29 PICKWICK DR E LOT 129	<input checked="" type="checkbox"/> Add
		GREENACRES FL 33463	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
 2016 OCT 31 PM 4:32
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

FILED
2016 OCT 31 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 11/01/2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated October 28, 2016.

Signature of a member or authorized representative of a member

ERAIZY ALVAREZ

Typed or printed name of signee