## L14000137251

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	ate/Zip/Phone #)  WAIT MAIL  ss Entity Name)
(Busi	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



100274717871

07/20/15--01006--030 \*\*25.00

2015 JUL 20 P 12: 49

JUL 2 1 2015

8 MASON

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	THE GARDEN FLOWERS LLC
IX. D.J.	Name of Limited Liability Company
	closed Articles of Amendment and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	tondoño Andres
	Name of Person
	He EALden Flowers LLC Firm/Company
	Printeompany
	2501 E COMMERCIAL BLVD SUITE 100
	Address
	FORTLAUDERDALE FL 33368
	City State and Zip Code  F: Negold 2009 ( Ltot Mov) . COM.  B-full address (to be used for future named report notification)
For first	her information concerning this matter, please eaff:
	Andres Jondono at (754) 368-1120  Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
<b>325</b>	00 Filing Fee

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FT 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

THE GARDEN FLOWERS LLC			
(Name of the Limited Liability C (A Florida Lin	ompany as it now appea nited Liability (Company)	is on our records.)	
The Articles of Organization for this Limited Liability Com	pany were filed on 09	/02/2014	and assigned
Plorida document number 1.14000137251			
his amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited</u>	ligbility company be	<u>eFe</u> :	200
he new name must be distinguishable and contain the words "Limited	Liability Company 1 the c	lesignation "LLC" or the	THE PERSON NAMED IN COLUMN 1
Inter new principal offices address, if applicable:			285
Principal office address MUST BE A STREET ADDRES	<u>(S)</u> 2501 E COMN1	ERCIAL BLVD SUIT	Eabo O
	FORTLAUDE	RDALE FL 33308	S S
inter new mailing address, if applicable:	2501 E COMM	ERCIAL BLVD SUIT	D
Mailing address MAY BE A POST OFFICE BOX)	FORTLAUDER	DALE FL 33308	
<ol> <li>If amending the registered agent and/or registere egistered agent and/or the new registered office address</li> </ol>		our records, <u>ente</u>	er the name of the
Name of New Registered Agent: O H	AÎRA OR	tesa	
New Registered Office Address: 2501 F.Co	OMMERCIAL BLVD S	UITE 100	
	Kuter Flor	rida street uddress	
FORTLA	UDERDALE /	, Florida	53308
	Сир		Zıp 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

$\mathbf{AMBR} = \mathbf{A}0$	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MER	OMA: Ra OrtegA	2501 E Commercial Blvd	Add
	U	Suite 100	Remove
		Fort Lauderdole, Fl 3330	28 □ Change
MER	Andres tondono	3200 N Federal Hwy K-	4_ 🗆 Add
		Fort Loudewolle, F/ 3330	
-			Change
			Add
			□ Remove
			Change
and the second of the second o			O Add
			□ Remove
			Change
			<b>_</b> Add
			🗆 Remove
		· · · · · · · · · · · · · · · · · · ·	S Change
		1.3	S ACC
			D Romoto
			Change

			· · · · · · · · · · · · · · · · · · ·					
			<del></del>	<del></del>		· · · · · · · · · · · · · · · · · · ·		
						······································		
	<del> </del>	· · · · · · · · · · · · · · · · · · ·						
								<del></del> -
						•		<del></del>
			····				<del></del> ,	- <del></del>
							<u> </u>	
				<u></u>				
				<del></del>				
4	e . dh.m. al	41 4 F.	#11	DY.	/13/2015		-15	
effective date i	I other that s listed, the da	n the date of the must be specifiables, door	ining:	D7/	ng of more than	O days after fi	r <b>at)</b> lling.) Pursuant	to 605
		the Department		oplicable statutor ords	ry ming require	ements, this o	aare wiii noi t	DC 11SIC
						. 13 O1 -		
				i nocan enec	uve ume, a	t 12:01 a.	m. on the	earne
record spe		e record is to	oed.					
record spe he 90th da	y after the			_				
record spe he 90th da	y after the			5	١	<u>ئ</u> ر.	۲.3 هدر	
record spe he 90th da	y after the	07/13	3 201				100 100 100 100 100 100 100 100 100 100	Mej
record spe he 90th da	y after the	07/13	B Z 01	authorized representations of significant surfaced name of significant sur	<b>!</b>		2015 .UL 20 P 12: 49	effer y

Filing Fee: \$25.00