

L14000170294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

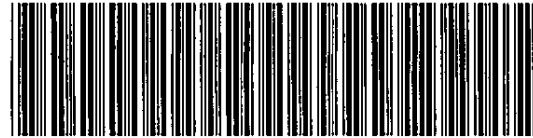
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000291019870

10/07/16--01026--021 **30.00

FILED
2021 OCT 10 STATE
16 OCT -7 PM 1:37
CLERK OF SUPERIOR COURT

OCT 10 2016
J. HARRIS

Check No. 1000

Date: October 3, 2016

From: Richard E. Taylor Registered agent for Tree of Life 7, LLC and Renewable Landscapes, LLC .

To: The Secretary of the State of Florida: Division of Corporations

COVER LETTER

Regarding: Trading entity names below

My name is Richard E. Taylor, I currently operate 2 "Start Up" Corporations (both LLC's) in the state of Florida:

Tree of Life 7, LLC L14000170294 and

Renewable Landscapes, LLC L16000132643

The impetus for this correspondence is to simply TRADE the names of each of these LLC's to better fit the business activities held by each as they have evolved recently.

As such, I have prepared the documents that need to be entered as the **new business** for: Renewable Landscapes, LLC. The documents enclosed are; "The Articles of Organization" and the "By Laws" for this entity.

Consequently, the Articles of Organization for the NEW BUSINESS: Tree of Life 7, LLC are simple Organization documents such as the Electronic Articles of Organization enclosed.

Should you have any questions or concerns please do not hesitate to call me.

Respectfully,



Richard E. Taylor

317-331-5594 or 352-404-8645

1222 Chateau Circle Minneola, FL 34715

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Amendment Tree of Life 7, LLC L14000170294
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:

Elizabeth M. Taylor

Name of Person

Tree of Life 7, LLC

Firm/Company

1222 Chateau Circle

Address

Minneola, FL 34715

City/State and Zip Code

treeoflifeseven@gmail.com

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

For further information concerning this matter, please call:

Richard E. Taylor

352 404-8645
at ()
Area Code Daytime Telephone Number

Name of Person

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**

Tree of Life 7, LLC L 14000170294

(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 11/3/2014 and assigned
Florida document number L 14000170294.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Renewable Landscapes, LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
NOV 10 2014
CLERK OF
COURT
16 OCT - 7 PM : 37

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:

New Registered Office Address:

Enter Florida street address

_____, **Florida** _____
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 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

MGR = Manager
AMBR = Authorized Member

Page 2 of 3


[illegible]

(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)

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.

October 3, 2016



Signature of a member or authorized representative

Richard E. Taylor

16 OCT -7 PM 1:37