

L15000036702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

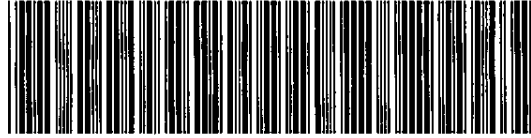
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
15 APR 13 PM 12:41
PLEASE RETURN TO ACKNOWLEDGE SUFFICIENCY OF FILING

APPROVED
15 APR 13 PM 12:48
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APR 13 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boringuen Professional Landscape LLC
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:

Daril J. Irizarry Velez
Name of Person

[Signature]
Firm/Company

5610 Curry Ford Rd Apt K1
Address

Orlando FL 32822
City/State and Zip Code

darilirizarrypr@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daril J. Irizarry Velez at (321) 444-8906
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 2, 2015

BORINQUEN PROFESSIONAL LANDSCAPE LLC
DARIL J IRIZARRY
5610 CURRY FORD RD, APT K-1
ORLANDO, FL 32822

SUBJECT: BORINQUEN PROFESSIONAL LANDSCAPE LLC
Ref. Number: L15000036702

We have received your document for BORINQUEN PROFESSIONAL LANDSCAPE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 415A00006608

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Boringuen Professional Landscape LLC

(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 2-27-15 and assigned Florida document number L1500036702.

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 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

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>	<u>Type of Action</u>
<u>AMBR</u>	<u>Yahaira Diaz-Badillo</u>	<u>5610 Curry Ford Rd. Apt K-1</u>	<input type="checkbox"/> Add
		<u>Orlando FL 32822</u>	<input checked="" type="checkbox"/> Remove
<u>AMBR</u>	<u>Daril J. Trizany</u>	<u>5610 Curry Ford Rd. Apt K-1</u>	<input checked="" type="checkbox"/> Add
		<u>Orlando FL 32822</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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10:00 AM

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 4-13, 2015



Signature of a member or authorized representative of a member

David J. Frizerry Velaz

Typed or printed name of signee

FILED
APR 13 2015
TALLAHASSEE, FLORIDA

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APPROVED