LIL 0000 91699

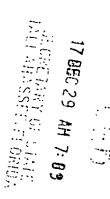
| (Req | uestor's Name) | |
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| PICK-UP | MAIT WAIT | MAJL |
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| Certified Copies | Certificates | s of Status |
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| Special Instructions to F | iling Officer: | |
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Office Use Only



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COVER LETTER

| TO: | Registration Se Division of Cor | | | |
|----------|------------------------------------|--|---|--|
| SUBJE | Sitex Land, | LLC | | |
| | <u></u> - | Name of Lim | ited Liability Company | |
| The enc | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please r | eturn all correspo | ndence concerning this matter | to the following: | |
| | | MAT | Then Hilyer Name of Person | |
| | | Sitex Land, LLC | | |
| | | - | Firm/Company | |
| | | 7643 Gate Parkway, #104- | -127 | |
| | | - | Address | |
| | | Jacksonville, FL 32256 | | |
| | | | City/State and Zip Code | |
| | | E-mail address: (| to be used for future annual report solifi | cation) |
| For furt | her information co | oncerning this matter, please ca | ail: | |
| | MPTT Hey Name of | Person | at (<u>941</u>) <u>465</u> Area Code Daytime | 1749 Telephone Number |
| Enclose | d is a check for th | e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Sitex La | ind, LLC | | | | | | |
|---|-----------------------------------|--|---|--|---------------|-------------------|----------|
| | (Name of the Limited I | Liability Compan Florida Limited Li | y as it now appear iability Company) | s on our records. |) | | |
| | | ility Company v | were filed on Ma | y 10, 2016 | | _ and a | ssigned |
| lorida document nun | ıber <u>L16000091699</u> | · | | | | | |
| his amendment is sul | omitted to amend the followi | ing: | | | | | |
| (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 May 10, 2016 and assigned period document number L16000091699 This amendment is submitted to amend the following: 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 "LLC" of the abbreviation "LLC" of the abbreviation "LLC" of the new principal office address MUST BE A STREET ADDRESS) The new mailing address, if applicable: The new mailing address, if applicable: The new mailing address, if applicable: The new mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the harme of the new gistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address | | | | | | | |
| ne new name must be dis | tinguishable and contain the word | ls "Limited Liabilit | ty Company," the de | esignation "LLC" | or the abbrev | riation " | L.L.C." |
| nter new principal | offices address, if applicabl | le: | | | | | |
| Principal office addr | ess MUST BE A STREET A | ADDRESS) | | | | | |
| | | | | | <u> </u> | | |
| | | | | | | | |
| nter new mailing ac | ldress, if applicable: | | | | 7 - | | <u>.</u> |
| <u> 1ailing address MA</u> | Y BE A POST OFFICE BO | <u>)X)</u> | | _ | | | . 1 |
| - | | | | | L: | ΑH | |
| | | | <u> </u> | | 95 | 7: { | 7 |
| | | | | our records, | enter the | h a me | of the |
| gistered agent and/ | or the new registered office | e addr <u>ess here</u> : | ; | | • * | | |
| | | | | | | | |
| Name of Nev | v Registered Agent: | | | | | | |
| New Registe | red Office Address: | <u></u> | | ······································ | | | |
| | | | Enter Flori | da street address | | | |
| | _ | | | Flor | ida | | |
| | | | 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 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> | Type of Action |
|--------------|------------------------------|---------------------|----------------|
| MGR | Joseph Craig | 501 Shawnee Trail | Add |
| | | Geneva, FL 32732 | ■ Remove |
| | | | ☐ Change |
| MGR | Sitex Landscape Holdings LLC | 5321 Shark Drive | ■ Add |
| | | Bradenton, FL 34208 | Remove |
| | | | ☐ Change |
| | | | Add |
| | | | □ Remove |
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| Tective date, if other than the da an effective date is listed, the date must be | te of filing: specific and cannot | ot be prior to o | date of filing or | more than 90 da | (optional) es after filing.) P | ursuant to | 605.02 |
| ote: If the date inserted in this block ocument's effective date on the Depa | does not meet th | he applicabl | e statutory fil | ng requiremen | ts, this date wi | ll not be l | listed : |
| | | | | | | | |
| e record specifies a delayed e The 90th day after the record | ffective date, I is filed. | but not a | in effective | time, at 12 | :01 a.m. or | the ea | rlier |
| December 28 | 20 | 17 | • | | | | |
| | , – – | | | | | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00