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SECRETARY OF STATE

K. SALY

· EXMANNER

AUG 5

COVER LETTER

	Registration Sec Division of Corp			
eun iec	Renewable l	andscaprs, LLC		
SUBJEC	T:	Name of Limite	ed Liability Company	
		Amendment and fee(s) are subm	-	
		Elizabeth M. Taylor		
			Name of Person	
		Renewable Landscapes, LLC		
		_	Firm/Company	
		614 E. HWY 50 Suite 158		
			Address	
		Clermont, FL 34711		
			City/State and Zip Code	···
		Etaylor@renewablelandscape		
For furth	er information co	E-mail address: (to	be used for future annual report notifical:	ation)
Elizabeth	M. Taylor		352 404-8645	
	Name of	Person	at ()at Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	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**

2016 AUG-4 PM 3: 37

Renewable Landscapes,LLC

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

l Liability Company)	SEE FLORIDA			
y were filed on 07/08/2016	and assigned			
bility company here:				
pility Company," the designation "LLC	or the abbreviation "L.L.C."			
614 East HWY 50 Suite 158	614 East HWY 50 Suite 158			
Clermont, FL 34711				
614 East Hwy 50 Suite 158				
Clermont, FL 34711				
	, enter the name of the ne			
Enter Florida street addres:	•			
Fla	· · · · · · · · · · · · · · · · · · ·			
City , Flo	orida			
	bility company here: bility Company," the designation "LLC" 614 East HWY 50 Suite 158 Clermont, FL 34711 614 East Hwy 50 Suite 158			

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>	Address	Type of Action
MGR	William T. Vastine	2771 Eagle Lake Drive	= Add
		Clermont, FL 34711	□ Remove
			Change
MGR	Theodore J. Campo	4627 SE Bridgetown Ct	■ Add
		Stuart, FL 34997	□ Remove
			□ Change
			Add
			Remove Change
			PA Add 31
		<u>:</u>	Remove
			☐ Change
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			□ Change
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(If an effective on Mote: If the	ate, if other the date is listed, the date inserted in effective date of	date must be sp n this block d	e of filing: pecific and can oes not meet	the applicabl	date of filing or n e statutory filir	ore than 90 days	optional) after filing.) Pu , this date wil	rsuant to 605.0207 (I not be listed as t
	specifies a d n day after t			e, but not a	in effective	time, at 12:	01 a.m. on	the earlier of:
Dated	/2016		s N-					
	\	/</td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00