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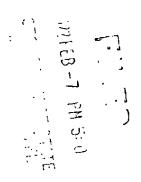
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division	of Corporations		
DO	UGLAS LANDSCAPIN	NG GROUP LLC	
SUBJECT:		Name of Limited Liability Compa	uny
The enclosed Arti	icles of Amendment and	I fee(s) are submitted for filing.	
		_	
Please return all c	orrespondence concerni	ing this matter to the following:	
	JOHN M. BI	ENTON, ESQUIRE	
		Name of Pers	on
	GARTNER,	BROCK AND SIMON, LLP	
		Firm/Compa	ny
	1300 RIVER	RPLACE BLVD., SUITE 525	
	- 	Address	
	JACKSONV	ILLE, FLORIDA 32207	
		City/State and Zip	Code
	DTRaggins@;	=	
		-mail address: (to be used for future	annual report notification)
For further inform	ation concerning this ma	atter, please call:	
JOHN M. BENTO	ON	904 at (399-0870 EXT. 3012
	Name of Person	Area Cod	Daytime Telephone Number
Enclosed is a chec	k for the following amo	ount:	
□ \$25.00 Filing		ing Fee & S55.00 Filing le of Status Certified Co (additional cop	Opy Certificate of Status &
Mailing A			reet Address:
	ation Section		gistration Section
P.O. Bo	n of Corporations x 6327		vision of Corporations e Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Douglas Landscaping Group 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 August 18, 2016 Florida document number L16000155467 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LARK Contractors, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) 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

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.

Cirv

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	Hans B. Krieg	PO Box 380013	■Add
		Jacksonville, Florida 32205	□Remove
			□Change
			□Remove
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Dated _	\		51_	2022/					
Daica _)H-/	30.00	<u> </u>	=,-/-					
				- /					

Typed or printed name of signee