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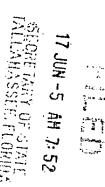
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration Sec Division of Corp | | |
|---|---|--|
| SUBJECT: | Green tech flowers LLC | |
| Division of Corporations SUBJECT: Subject | | |
| The enclosed Articles of A | Amendment and fee(s) are submitted for filing. | |
| Please return all correspon | ndence concerning this matter to the following: | |
| | HAROID CARDOWA | |
| | Name of Person | |
| | Green tech flowers | |
| | Firm/Company | |
| | 17698 S.W. 107 AVE. | |
| | | |
| | | |
| | City/State and Zip Code Harold. Cordend Come. com | |
| | E-mail address: (to be used for future annual report notification) | |
| For further information co | ncerning this matter, please call: | |
| HAROIS | CARDOVA at (305) 9343517 | |
| Name of | Person Area Code Daytime Telephone Number | |
| Enclosed is a check for the | e following amount: | |
| \$25.00 Filing Fee | □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) 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

| Green tech | I FIOMERS FFG | |
|--|--|---------------|
| (<u>Name of the Limited Liability Company</u> (A Florida Limited Lia | r as it now appears on our records.) ability Company) | |
| The Articles of Organization for this Limited Liability Company w | vere filed on 10/11/2016 and assigne | ed . |
| Florida document number L 16000 1876 40 | · | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabili | ity company here: | |
| the MEGA ROSES L | LC | |
| The new name must be distinguishable and contain the words "Limited Liability | y Company," the designation "LLC" or the abbreviation "L.L.C." | 17 |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | <u>س/</u> ن | |
| | | |
| Enter war weiling address if applicables | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | |
| | | |
| | | |
| B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here: | ce address on our records, enter the name of t | he nev |
| | | |
| Name of New Registered Agent: | 시A <u>결정 는</u> | . |
| New Registered Office Address: | U/A. SSE . | e f |
| | Enter Florida street address | S. Carrier |
| | Florida 70 | (1) |
| | City Zip Code | · **** 3 |
| 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

| $\mathbf{AMBR} = A$ | Authorized Member | | |
|---------------------|-------------------|---------------------|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| | | | Add |
| | | N/A | □ Remove |
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| ctive date, if oth | or than the date | of filing: | | | | (on | tional) | | |
| effective date is listed | l, the date must be sp | ecific and c | annot be prio | r to date of fil | ng or more th | an 90 days af | ter filing.) Pu | rsuant to 60 | 05.02 |
| te: If the date inser ument's effective d | | | | | ry filing req | uirements, t | his date will | not be lis | sted a |
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| record specifies | a delaved effo | ective da | te but no | nt an effe | rtive time. | at 12:01 | a.m. on | the earl | lier |
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Filing Fee: \$25.00