

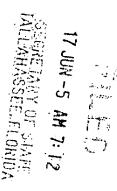
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(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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(Bu	isiness Entity Name)
(Do	cument Number)	
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COVER LETTER

TO:	Registration Se Division of Cor				
		E MAINTENANCE GROUP,	LLC		
SUBJ	ECT:	Name of Lim	ited Liability Company		
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		JOSE L, GREGORIO JR			
			Name of Person		
		TRUSCAPE MAINTENA	NCE GROUP, LLC		
		 	Firm/Company		
		6411 COW PEN ROAD N	PEN ROAD N 203		
			Address	·	
		MIAMI LAKES, FLORIC	A 33016		
		JGREGORIO1@LIVE.CO	City/State and Zip Code M		
		E-mail address: (to be used for future annual report notifi	ication)	
For fu	rther information co	oncerning this matter, please ca	all:		
JOSE	GREGORIO		786 760-4752 at ()		
	Name of	f Person	Area Code Daytime	Telephone Number	
Enclos	sed is a check for th	ne following amount:		,	
□ \$ 2	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)	\sim

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

TRUSCAPE MAINTENANCE GROUP, LLC

(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	sility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6411 COW PEN ROAD N203
(Principal office address MUST BE A STREET ADDRESS)	MIAMI LAKES, FLORIDA 33016
	6411 COW PEN ROAD N203
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MIAMI LAKES, FLORIDA 33016
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	7 .
New Registered Office Address:	1
New Registered Office Address.	Enter Florida street address
	City , Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agr.	ee to act in this capacity. I further agree to comply with performance of my duties, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	JOSE L, GREGORIO JR	6411 COWN PEN ROAD N203	= Add
		MIAMI LAKES, FLORIDA 33016	☐ Remove
			☐ Change
			Remove
			□ Change
***			Add
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			
			□ Remove
			☐ Change
			□ Add
			Remove
			□ Change

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Filing Fee: \$25.00