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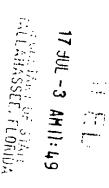
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3.6.7

## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	C1 & Land	Scaping LLC	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	jos!	hua Cole	
	<u>CC1</u> \$	Landscaping Firm-Company	LLC
	LILE Winde	emere Dc.	
	Lehigh A	Acres FC 3	3972
	_	MICLIGATION OF THE CONTROL OF THE CO	
For further information co	oncerning this matter, please co	ull.	
_Joshua_Name o	COLO	at (239) 333 · Area Code Daytime	- 7752 Telephone Number
Enclosed is a check for th	ne 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 tadditional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Fallahassee, 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

(Name of the Limited 1	-MGSCC Liability Compar Florida Limited L	ives it now appears on o iability Company)	ur records.)		
The Articles of Organization for this Limited Liabi	lity Company (	were filed on	ne 19th/2	Ol and assig	gned
This amendment is submitted to amend the followi	ng:				
A. If amending name, <u>enter the new name of th</u>		AKA			
The new name must be distinguishable and contain the words	s "Limited Liabili	ty Company," the designa	tion "LLC" or the at	obreviation "L.L.	.C."
Enter new principal offices address, if applicabl (Principal office address MUST BE A STREET &		_N A_			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	1 <b>X</b> )	NA		ALLAHASS	:
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of		records, enter	S AM 1 o	f the new
Name of New Registered Agent:	jes	sica_Col	e		
New Registered Office Address:	416	<u>Winder</u>	nore D	cive_	<del></del>
- -	lehig	h-Acres	Florida	3397 Zip Code	2_

## 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

Page 1 of 3

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

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□ Add
			□ Remove
		<del></del>	☐ Change
			☐ Remove
			□ Change
			Remove
			A Change
			Remove  ALLAHASSEE, FLORIDA
			Channe
			Add
			□ Remove
			□ Change
			Remove
			□ Change

	nua (ol regist nted as	e is eed a	Current Gent. t	rly doc le need of th	ume Is_to De_	be.
Donk Jessica	<u>"očrom</u>	+ for 1	<u> </u>	Dusines Izreal_f	.S.	
Joshua	n War	ren Co	le is	owner	/Me	5 R
					ALLAHASSEE.	17 JUL -3 AF
					FLORIDA	11:19
Effective date, if other (If an effective date is listed, the Note: If the date inserted document's effective date	e date must be specific in this block does n	and cannot be prior to out meet the applicable			iling.) Pursu	
the record specifies a ) The 90th day after			an effective tir	ne, at 12:01 a.	m. on th	ie earlier c
Dated 6 27	Signyhure o	2017 Shee (	La representative o	t a member		
		1 -1	C > -			

Page 3 of 3

Filing Fee: \$25.00