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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Lawn buys of Tampa Boy UC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jerry Monts De Oca Tr Name of Person	
The Laun buys of Tampa Bay LLC	
5017 N. Coolidge Ave	
Tampa fr 334014 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Jerry Marks De Oca Tr at (813) 713 - 0686 7 7 Area Code Daytime Telephone Number 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Enclosed is a check for the following amount:	֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֖֡֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֡֝֓֓֡֓֡֡֓֡֓֡֡֓֡֓֡֡֡֡֡
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) □ \$25.00 Filing Fee & 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

(Name of the Limited Liability Company as (A Florida Limited Liability	it ndw appears on our records. y Company)	<u></u> 		-	
The Articles of Organization for this Limited Liability Company were Florida document number <u>L1700015 4070</u> .	filed on July 18th	<u> 201</u>	$oldsymbol{\pm}$ and	assigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability of	company here:				
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" (or the ab	breviation	v"L.L.C."	
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)					
Training with the state of the best of the					
_					
B. If amending the registered agent and/or registered office	address on our records,	<u>enter</u>	the nar	me of the no	,
registered agent and/or the new registered office address here:		;'	===	g - Harring	
		<i>;</i> ,	(5)		
Name of New Registered Agent:		•	:2		
		1	ω1 1 ⁻¹	:11	
New Registered Office Address:	Enter Florida street address		<u> </u>	·	
	Consection and Succeedants	-	: :		
	. Flor	ida	<u>)</u>		

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.

Ciiv

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 Type of Action Title Name Address Jerry Monts De Cha S 5017 N. coolidge Ave 0 Add Tampa, Gr. 38014 Remove ___ Change Anthony M Perez 753 Share Acres St 0 Add Wesley Chapel, 12 33545 PREMOVE Change Jerry Monts De Orate 12421 citation Rd 0 Add Spring Hill, FL 34610 Remove personal

Please Change address 4 to MUR Thange MER AMBR Tray woulf 5762 Mary Jane Jane 12/10 Land O'Lakes, FZ 34639 □ Remove □ Change □ Add □ Remove Change

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an effective date ote: If the date	if other than the is listed, the date must inserted in this bl ctive date on the D	st be specific and lock does not r	d cannot be prior neet the applic	to date of filing a ble statutory I	or more than 90 da	iys after filing.	.) Pursuant to 605.
	cifies a delayed			t an effectiv	re time, at 12	2:01 a(m.	on the earlie
The 90th da	y after the rec	ord is filed.				<u> </u>	120
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ated <u>OC+</u>		Signature of a	member or author	orized represents	tive of a member	<u>;.</u>	02

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Filing Fee: \$25.00