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D. SCOTT AUG 1 7 2017

## **COVER LETTER**

TO: Registration Section Division of Corpo			
SUBJECT: Besp		d Liability Company	• <del>-</del>
The enclosed Articles of Ar	mendment and fee(s) are submi	itted for filing.	
Please return all correspond	ence concerning this matter to	the following:	
	Matthew	Bell, CPA	
	Harding Be	11 Internation	ul, Ire.
	113 Pontoto	C Plaza	
	AuburnJale	City/State and Zip Code	<u> </u>
	Su San Nar E-mail address: (to	dince hb; tax	Coh
For further information con	cerning this matter, please cal	l:	
Matthew Name of P	L. Bell, CPA	at (863) 968 - 10 Area Code Daytime To	2/O clephone Number
Enclosed is a check for the	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 (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

Bespoke Landscaping, LLC
Name of the Limited Liability Company and now appears on our records.) (A Florida Limited Liability Company)
•
The Articles of Organization for this Limited Liability Company were filed on 7/24/2017 and assigned
Florida document number L17600158166.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
<u> </u>
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
, Florida
City Zin Code

## 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

AMBR = Authorized Member Address Type of Action <u>Title</u> Name MGR Stephen Hartley 10 Taberner Close DAG Standish, Wigan Remove WN6 0-DS UK Jachange MGR Monica Lodriguito 705 Bin Kalaib Bldg 1 Add Al Blog, Al Barsha 1 - Zemove Duba: UA schange □ Add ☐ Remove ☐ Change ☐ Remove ☐ Change

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an effective date ote: If the dat	if other than the is listed, the date muse inserted in this bl ctive date on the D	st be specific and lock does not n	d cannot be prior neet the applica	able statutory fili	more than 90 days	optional) after filing.) Pursua , this date will no	nt to 605.0207 (3 t be listed as th
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Filing Fee: \$25.00