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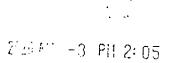
Tallahassee, FL 32314

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SUBJEC	T. ALL AME	RICAN TRACTOR & TREE LI	. • _C			
59(71)(11)()	· · · · · · · · · · · · · · · · · · ·	Name of Lin	nited Liability Company			
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing			
Please re	turn all correspo	ondence concerning this matter	to the following			
		Jeffrey Hosterman				
			Name of Person			
		All American tractor and	ree LLC			
			Firm/Company			
		30351 Redtree dr.				
			Address			
		Leesburg, Fl 34748				
		City/State and Zip Code				
		Allamericantractorandtree	-			
For furthe	er information e	oncerning this matter, please c	to be used for future annual report no all:	ancation)		
Jeff Host	erman		352 636 2850			
	Name o	f Person	at () Area Code Dayti	me Telephone Number		
Enclosed	is a check for th	ne following amount:				
₩ \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addres Registration S		Street Address: Registration S	ection		
1	Division of C	orporations	Division of Co	orporations		
I	P.O. Box 632	7	The Centre of	Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ALL AMERICAN TRACTOR & TREE LLC

(A Florida Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/25/2017 and assigned Florida document number 1.17000197768

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 "LLC."

Enter new principal offices address, if applicable:

B.	If amending the registered agent and/or registered office address on our	records,	enter the	name of the	new re	gistered
8 <u>2</u>	ent and/or the new registered office address here:					

Name of New Registered Agent:		
New Registered Office Address:	Euter Florida street ade	lress
	City	Florida

New Registered Agent's Signature, if changing Registered Agent:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 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

<u>Title</u>	Name	<u>Address</u>	Type of Action
VP	Tommie Peebles	15148 Willow Ln	□Add
		Tavares, Fl 32778	■Remove
			□ Change
Vp	Jeffrey Hosterman	30351 Redtree Dr	= Add
		Leesburg, Fl 34748	□Remove
			□Change
			□Add
		□Remove	
			Change
			□Add
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ffecti	ve date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the second of the date o
	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 to fif the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
recor d is fil	
ated	July 31 2020
	Colored to the second s
	Ingulature of a member or authorized representative of a member
	Jeffrey Hosterman
	•

Filing Fee: \$25.00