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J. HARRIE

COVER LETTER

	egistration Sect ivision of Corpo						
		LANDSCAPING LLC					
SUBJECT	Name of Limited Liability Company						
The enclos	ed Articles of A	mendment and fee(s) are sub	mitted for filing.				
Please retu	rn all correspond	dence concerning this matter	to the following:				
		MONICA OROZCO					
			Name of Person				
MONITAX LLC							
Firm/Company							
	1404 E SILVER STAR RD						
		OCOEE, FLORIDA 34761 City/State and Zip Code					
		MONITAXFLORIDA@GMAIL.COM E-mail address: (to be used for future annual report notification)					
For further	information cor	neerning this matter, please ca	·				
MAGDAL	ENO PEREZ		321 322-8217				
Name of Person			at () Daytime '	Telephone Number			
Enclosed i	s 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:

TO:

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

LOS PEREZ LANDSCAPING LLC (Name of the 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 _______ and assigned Florida document number ____L17000223869 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LENNIS LANDSCAPING SERVICE LLC 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) \bigcirc 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			Remove
			Change
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			Remove
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Effective date, if other than the date of filing: [6] [6] [6] [6] [7] [8] [8] [9] [9] [9] [9] [9] [9	
ne record specifies a delayed effective date, but not an effective time, at 12:0 The 90th day after the record is filed.	1 a.m. on the earlier of
Jated jUNE 15TH 2018	~ı \ 3
	2018 . TALL
Signature of a member examinorized representative of a member	F 1

Page 3 of 3

Filing Fee: \$25.00