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2022 APR -5 AM 7: 49
SECRETARY OF STATE
TALLAHASSEE, FI

O SIMMONS APR 1 9 2022

COVER LETTER

Registration Section Division of Corporations

TO:

ISLAND I	.ANDSCAPE SERVICES, LL	C	
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	PATRICK H. NEALE		
		Name of Person	
	PATRICK NEALE & AS	SOCIATES	
		Firm/Company	
	5470 BRYSON COURT,	SUITE 103	
	71.75.	Address	···
	NAPLES, FL 34109		
		City/State and Zip Code	
	OFFICE@PATRICKNEAI		
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
PATRICK NEALE		239 642-1485	
Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of C P.O. Box 63: Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 12415 N. Monre	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT FILED TO ARTICLES OF ORGANIZATION APR -5 AM 7: 49 OF

SECRETARY OF STATE TALLAHASSEE, FL

ISLAND LANDSCAPE SERVICES 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 Compan	y were filed on 11/20/2017	and assigned
Florida document number $\frac{117000239347}{}$.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility 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)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records. 9	enter the name of the new registered
New Registered Office Address:		
	Emer Florula street	address
		, Florida Zip Code
		Zip Code
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	e performance of my duti provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is
II Ch.	inging Registered Agent, Signa	ture 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
MGR	JONATHAN WHITLOW	1287 Bluebird Avenue	□Add
		Marco Island,FL 34145	■Remove
			□Change
MGR	Maria Natalia Rodriguez Rosado	1287 Bluebird Avenue	= Add
		Marco Island Ft. 34145	□Remove
			Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
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es a delayed effective da	ite, but not a	n effective ti	ime, at 12:6)1 a.m. on th	e earlier of: (b) The 90th di	ay after the
3/23		2022	·				
	•	- 1A	A	>			
Sign	nature of a inc	ember is / auth	onzed repre	sentanve of a i	nember		
ite Te	e, if other than the da te is listed, the date must be ate inserted in this block fective date on the Depar ies a delayed effective da	e, if other than the date of filing: te is listed, the date must be specific and cate inserted in this block does not me fective date on the Department of Sta ies a delayed effective date, but not a	e, if other than the date of filing: the is listed, the date must be specific and cannot be prior ate inserted in this block does not meet the applic fective date on the Department of State's records ies a delayed effective date, but not an effective t 3/23 . 2022 Signature of a member of authority	e, if other than the date of filing: the is listed, the date must be specific and cannot be prior to date of filing ate inserted in this block does not meet the applicable statute fective date on the Department of State's records. The statute of a delayed effective date, but not an effective time, at 12:6 Signature of a member of authorized representations.	e, if other than the date of filing: the is listed, the date must be specific and cannot be prior to date of filing or more the ate inserted in this block does not meet the applicable statutory filing requestive date on the Department of State's records. The first and cannot be prior to date of filing or more that it is a possible statutory filing requestive date on the Department of State's records. The first and cannot be prior to date of filing or more that it is a possible statutory filing requestion and the date of the d	e, if other than the date of filing:	e, if other than the date of filing:

Filing Fee: \$25.00