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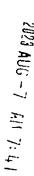
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COVER LETTER

	tion Section of Corporations	
	est Landscapes, LLC	
SUBJECT:	Name of L	imited Liability Company
The enclosed Artic	eles of Amendment and fee(s) are so	ubmitted for filing.
Please return all co	orrespondence concerning this matter	er to the following:
	Ryan Stoddard	
		Name of Person
	Honest Landscapes, LLC	
		Firm/Company
	1580 Royal Road	
		Address
	Venice, Florida 34293	
		City/State and Zip Code
	ryan@honestlandscapes.c E-mail address	s: (to be used for future annual report notification)
For further inform	ation concerning this matter, please	: call:
Ryan Stoddard		941 400-9768
i	Name of Person	at (
Enclosed is a chec	ck for the following amount:	
■ \$25.00 Filing	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certificate of Status & Certified Copy (additional copy is enclosed)
Division P.O. Bo	ation Section n of Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Honest Landscanes LLC

2023 AUG -7 Al: 7: 61

	nited Liability Company as it now appears on or (A Florida Limited Liability Company)	<u>ır records.</u>)
	(A Florida Limited Claotity Company)	All Att St. 1
The Articles of Organization for this Limited	Liability Company were filed on $\frac{01/02/20}{}$	and assigned
Florida document number L18000000541	·	
This amendment is submitted to amend the fo	llowing:	
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 designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
Mattern address MAV DE A BOST OFFICE	E BOX)	
Maining address MAT BE A PUST UPFICE		
Mainng address MAT BE A PUST UPFICE		
Maiung address MA1 BE A POST OFFICE		
B. If amending the registered agent and/or	₽	s, enter the name of the new regi
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B. If amending the registered agent and/or agent and/or the new registered office addr	₽	s, enter the name of the new regi
B. If amending the registered agent and/or agent and/or the new registered office addr Name of New Registered Agent:	ess here:	
	1580 Royal Road	

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>	<u>Address</u>	Type of Action
AMBR	Ryan Stoddard	1580 Royal Road, Venice Florida 34293	□Add
			□Remove
			■ Change
			□Add
			∐Remove
			□Change
			□Add
			□ Remove
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			Change
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Signature of a member or authorized representative of a member	is filed	07/27/23
Signature of a member or authorized representative of a member	is filed	07/27/23
	is filed	· · · · · · · · · · · · · · · · · · ·
Ryan Stoddard RYAN STODDARD Typed or printed name of signee	is filed	Surfature of a member or authorized representative of a member