L1800051125

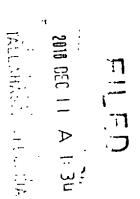
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| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: Registration Se Division of Cor | | | • | |
|--|--|---|---|------|
| | O MALDONADO LANDSCA | APING, LLC | • | |
| SUBJECT: | Name of Lim | ited Liability Company | | |
| | Amendment and fee(s) are sub | | | |
| Please return all correspo | JORGE SAAVEDRA | to the following: | | |
| | AMERICA INCOME TAX | Name of Person | | |
| | 2896 FOREST HILL BLV | Firm/Company | 2818 DEC | П |
| | PALM SPRINGS, FL 3340 | Address 06 | | H FD |
| | jorgesaa@bellsouth.net | City/State and Zip Code | | J |
| For further information c | oncerning this matter, please ca | | 37 | |
| SERVANDO MALDON | IADO | 561 667-1285 | | |
| Name o | f Person | Area Code Daytime | Telephone Number | |
| Enclosed is a check for the | 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 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

| SERVANDO MALDONADO LANDSCAPING, LL | | |
|--|---|-----------------------------------|
| (<u>Name of the Limited Liability Comp</u> (A Florida Limited | any as it now appears on our reco Liability Company) | or <u>ds.</u>) |
| The Articles of Organization for this Limited Liability Compan Florida document number <u>L18000051125</u> | y were filed on <u>02/26/2018</u> | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, <u>enter the new name of the limited lia</u> | bility company here: | |
| The new name must be distinguishable and contain the words "Limited Liab | pility Company," the designation "L | .LC" 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) | | D 0 |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address he | | rds, enter the name of the ne |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street add | tress |
| | | Florida |
| | | Zip 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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--------------------------------|--|----------------|
| MGR | JOAQUIN JR MOLINA-CASTANEDA | 5159 4TH RD N WEST PALM BEACH, FL 33415 | _ Add |
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| fective date, if other than the da n effective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Depa | specific and cannot does not meet the | t be prior to da e applicable | te of filing or n statutory filir | ore than 90 days | optional) after filing.) I , this date w | Pursuant to 6 ill not be li | 605.0207 isted as |
| record specifies a delayed e The 90th day after the record | ffective date, d is filed. | but not ar | effective | time, at 12:0 |)1 a.m. o | n the ear | lier o |
| DECEMBER 04 850+VO | 201 | 8 . | | | | | |
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Filing Fee: \$25.00