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COVER LETTER

Division of Cor			
SUBJECT:	s 15 Car		
	Name of Lim	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Alexan	der Alexan	nder
	LAND	ARTT LI	LC
	8635 V	W. Hillsborou	gAve #128
	Tampa		3615
	Landa E-mail address: (City/State and Zip Code + + + + + + + + + + + + + + + + + + +	amail. Com
For further information ed	oncerning this matter, please co	all:	
Alexande	r Alexand	er al 813 501	2027
Name of			ne Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 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)
Registra Division P.O. Be	NG ADDRESS: ation Section to of Corporations x 6327 ssee, FL 32314	STREET/COUR Registration Secti Division of Corpe Clifton Building 2661 Executive C	orations

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20

AS IS CARZ 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 O305 18 m and assigned in Florida document number L1800057128 This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: LANDARTT LLC
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: (Principal office address MUST BE A STREET ADDRESS) Tampa FLorida 33615
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
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: Alexander Alexander 8635 W. Hilbborough Ave#128 Enter Florida street address

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, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager

AMBR = Authorized Member Type of Action Title <u>Name</u> <u>Address</u> 8710 W. Hillsborough Add Remove Tampa FL 33615 8635 W. Hillsborough ☐ Change #128 ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add □ Remove Change □ Add ☐ Remove ☐ Change

D. Hamer	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
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_	
_	
(If an effec <u>Note:</u> 1	e date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	March 13 2020
	Signature of a member or authorized representative of a member
	Alexander Alexander
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00