118000119817

| (Red | questor's Name) | |
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| (Add | dress) | |
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| (City | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to I | Filing Officer: | |
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SECRETARY OF SAME DIVISION OF CORPORATIONS

N COOPER MAY 3 0 2018

COVER LETTER

| Div | ision of Corpe | orations | | |
|--------------------|-----------------|---|---|---|
| eun ie <i>e</i> e. | | andscape Company LLC | | |
| SUBJECT: | | Name of Limit | ted Liability Company | |
| | | | | |
| The enclosed | I Articles of A | mendment and fee(s) are subn | nitted for filing. | |
| Please returi | all correspon | dence concerning this matter to | o the following: | |
| | | Cesar Abanto | | |
| | | | Name of Person | |
| | | TrimScape Landscape Com | pany LLC | |
| | | | Firm/Company | **** |
| | | 7298 Lamplighter Street | | |
| | | | Address | |
| | | Spring Hill, FL 34606 | | |
| | | | City/State and Zip Code | |
| | | Trimscapecompany@gmail. | com o be used for future annual report notific | cation) |
| For further i | nformation co | ncerning this matter, please ca | | · |
| Cesar Aban | to | | 352 340-6271 | |
| | Name of | Person | at () | Telephone Number |
| Enclosed is | a check for the | e 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

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

| TrimScape Landscape Company L | | | <u></u> |
|--|--|--|---------------------------|
| (Name of the Limi | ted Liability Company as it i (A Florida Limited Liability) | now appears on our records.) Company) | |
| The Articles of Organization for this Limited L | iability Company were fi | iled on 05/14/2018 | and assigned |
| Florida document number L18000119817 | ·, | | |
| This amendment is submitted to amend the following | owing: | | |
| A. If amending name, enter the new name of | f the limited liability co | mpany here: | |
| The new name must be distinguishable and contain the | words "Limited Liability Com | pany," the designation "LLC" or t | the abbreviation "L.L.©" |
| Enter new principal offices address, if appli | cable: | | 3 OFF |
| (Principal office address MUST BE A STREI | ET ADDRESS) | | 2 CA |
| | | | ₩ 6000 1007 1007 |
| | | | H 9: |
| Enter new mailing address, if applicable: | • | | 39 37 E |
| (Mailing address MAY BE A POST OFFICE | <u>BOX)</u> | | |
| | - | | |
| B. If amending the registered agent and | or registered office a | ddress on our records, <u>e</u> 1 | ater the name of the new |
| registered agent and/or the new registered o | ffice address here: | | |
| Name of New Registered Agent: | Cesar Abanto | -7-7 | |
| New Registered Office Address: | 7298 Lamplighter Stree | et | |
| - | | Enter Florida street address | |
| | Spring Hill | | a 34606 |
| | Cit | iy. | 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> | <u>Address</u> | Type of Action |
|--------------|---------------------|-------------------------|----------------|
| MGR | Cesar Agusto Abanto | 7298 Lamplighter Street | |
| - | | Spring Hill, FL 34606 | Remove |
| | | | Change |
| AMBR | Maritza Penuela | 7298 Lamplighter Street | |
| | | Spring Hill, FL 34606 | □ Remove |
| | | | □ Change |
| AMBR | Sonia Duarte | 1267 Meredith Drive | Add |
| | | Spring Hill, FL 34608 | Remove |
| | | | ☐ Change |
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00