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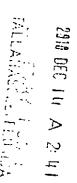
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COVER LETTER

TO:	Registration Se Division of Cor				
CHIB IE		al Home & Patio LLC			
SUBJE	CI;	Name of Lin	nited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		Ralph Perez			
			Name of Person		
			Firm/Company		دع دع
		2241 Nottingham Rd		ALL ALL	5918 DE
			Address	20 -	DEC 14
		South Daytona, FL 32119			ר. קי
		ralph@curbappealdaytona.c	City/State and Zip Code com		A 2: 111
		E-mail address: (to be used for future annual report notif	ication)	
For furt	her information c	oncerning this matter, please c	all:		
Ralph P	еге%		386 562-3738		
	Name o	f Person		: Telephone Number	•
Enclose	d 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 For Certificate of St Certified Copy (additional copy is o	tatus &
	Registr	ING ADDRESS: ration Section on of Corporations	STREET/COURT Registration Section Division of Corpor	n	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Curb Appeal Home & Patio LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our rec Liability Company)	ords.)
he Articles of Organization for this Limited Liability Company	were filed on <u>06/04/2018</u>	and assigned
lorida document number L18000137280		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
urb Appeal Hardscaping LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "I	LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	A16.	22
Principal office address MUST BE A STREET ADDRESS)		7 7
		# E m
nter new mailing address, if applicable:	NA	
Mailing address MAY BE A POST OFFICE BOX)		10 to 12 to
		ਰਮਾ <u>–</u> ਸ
. If amending the registered agent and/or registered of gistered agent and/or the new registered office address her		ords, <u>enter the name of the</u>
Name of New Registered Agent.	·	
New Registered Office Address:	Enter Florida street add	drae
	rmer r tortaa street aad	ar coo
	,	Florida Zip Code
	Cuh.	zip cow

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 = A $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
			Change
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			an effective time, at	12:01 a.m. on the earli
	ecember 11	2018		
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Signature of a member or authorized representative of a member		Signature of a member or authoriz	ed representative of a mem	ber

Page 3 of 3

Filing Fee: \$25.00