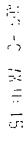
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(Requestor's Name)				
(Address)				
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S. PRATHER

COVER LETTER

COVER BEITER
TO: Registration Section Division of Corporations
SUBJECT: Name of limited Liability Company
Name of Bunned Blabutty Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Cartwright Name of Person
harta Scarce
Firm/Company
2215 Del Mar. Dr
Worth Ft. Myers FL 33903 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Cartwright at (724) 465-6765 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jays Landscaping and Maintenance 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 5014 24 \$2018 and assigned Florida document number $\frac{L18000177594}{L18000177594}$. This amendment is submitted to amend the following: 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 designation "LLC" 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) 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: 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.

City

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 = Mar AMBR = Aut	nager horized Member			
Title	Name		Address	Type of Action
AMBR	Michael	Cartwright	8680 Spring Mtn. War FT Myers FL 33908	Add
		É	7 Myers FL 33908	Remove
				Change
				□ Add
		-		Remove
				Change
		 -		Add
		-		□ Remove
		-		_D Change
				_D Add
		-		_□ Remove
		-		_ Change
				_□ Add
		-		_ Remove
		-		_□ Change

_□ Add

If amending any other information, enter change(s) here: (Attach additional sheets, if necess	rary.)
Company same change - Hevita	Scares
Adding Business Partner - Michael	
HOUNG INSINES WINDS MILLOWELL	Carrerial
	.
	<u> </u>
	
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Dusinoss to Start owning ?	<u> </u>
8/20/18	1
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Effective date, if other than the date of filing: (optional fan effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing or more than 90	al)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date	ng.) Pursuant to 605,0207 (3)(6) ate will not be listed as the
focument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m	n. on the earlier of:
The 90th day after the record is filed.	·:
0/10	
Dated 8/2/18	, 1
- Mit I em	-
Signature of a member or authorized representative of a member	
TICLAL AMBROOT	CO