L 18000198682

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)					
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2022 DEC 27 PM 12: 22

Division of Corporations

December 5, 2022

THOMAS CHRIS YATES 2417 ENTERPRISE RD ORANGE CITY, FL 32763

SUBJECT: DIY PEST & LAWN, LLC

Ref. Number: L18000198682

We have received your document for DIY PEST & LAWN, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$55.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Michael A Hall OPS Clerk

Letter Number: 822A00026875

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Div Pest o	M & Lawn d Liability Company as it now a A Florida Limited Liability Comp	UC	
Kame of the Limite	d Liability Company as it now a A Florida Limited Liability Comp	ppe.ux on our records.) any.	
The Articles of Organization for this Limited Lic Florida document number <u>L18000198</u>	ibility Company were filed o		and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability compa	ny here:	
The new name must be distinguishable and contain the we Enter new principal offices address, if applica (Principal office address MUST BE A STREE)	ible:	the designation "LLC" or the :	abbreviation "Li C"
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u></u>	Spre	DEC 27 PM 2: 22
B. If amending the registered agent and/or reagent and/or the new registered office address		our records, enter the nat	me of the new registered
Name of New Registered Agent: New Registered Office Address:	Thomas Co 24/7 Entrope Bronge Co	NIS PATES VEL RE TO Plorida street address Y Florida	32763 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 hability 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>AMB</u> R	Thomas Chris later	<u>Address</u>	Type of Action		
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