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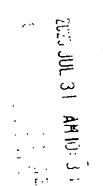
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COVERDETE

tion Section

train of Corporations

SEBJECT: Gardener	Eviter prises	of Florida	HC
•	and of Emitted Unionity Company		

The enclosed Articles of Amendment and fee(s) are submitted for filling.

Please return all correspondence concerning this matter to the following:

Claneuce Gardenes Name of Person
Gardenol Entervises of Florida LLC
17325 Hubers Ct
Odessa, F1. 33556 City/State and Zip Code
info & Gardenes Enterises. (om E-mail address: (to be used for future annual report notification)

For 6 other information concerning this matter, please call:

Clarence Gardiene	(at (8/3)	336-9480
Name of Person	Area Code	Daytime Telephone Number

1... school is a check for the following amount:

S25 00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & Certified Copy
(additional copy is enclosed) Certified Copy

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

(additional copy is enclosed)

TO ARTICLES OF ORGANIZATION OF

Gardener Futer pr	15es of	Florida	LLC	
(A Florida Limited L	iability Company)			
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L/8000285699}{}$	were filed on/	2/12/201	S and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	lity company her	<u>re</u> :		
a name must be distinguishable and contain the words "Limited Liabil	ity Company," the de	signation "LLC" or the ab	breviation "L.I	C."
· Propal offices address, if applicable:	<u></u>			· · -
v. office address MUST BE A STREET ADDRESS)				
			الر	
Enter new mailing address, if applicable:			<u> ယ</u>	بحصین محصیہ ، نوست
(Mailing address MAY BE A POST OFFICE BOX)				
			 	<u>_</u> こ
B. It amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our re	cords, <u>enter the nam</u>	e of the new	registe
agent and of the new registered office address neve.				
Name of New Registered Agent:				
New Registered Office Address:	Enter Flori			
		134 - 13		
	City	Florida	Zıp Code	
assected Agent's Signature, if changing Registered Agent:				
Thereby accept the appointment as registered agent and agre	e to act in this c	apacity. I further agi	ree to compi	ly with
provisions of all statutes relative to the proper and complete			•	•

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

	from our records:	rage, enter the title, hame, and address of each	person being a
MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Actio
MER	Azariah Howard	17325 Hubers Ct	S ad
		Odessa, Fl 33550	∠ □Remove
			□Change
MGR	Jailynn Howard	17325 Hubers ct	
		Odessa, F1 3355	6 □Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			Change
	4-71-11-20-11-11-1		□Add
			□Remove
			□Change

(If an c <u>Note</u> :	tive date, if other than the date of filing:
f the rece ecord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	July 31 2053
	Signature of a member or authorized representative of a member
	Typed or printed name of signee