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COVER LETTER

Division of Corpor	rations	
SUBJECT:	Name of Limited Liability Company	s, LLC
The enclosed Articles of Am	nendment and fee(s) are submitted for filing.	
Please return all corresponde	ence concerning this matter to the following:	
	Lis A Raque Name of Person	
	Straight Cut lawn 5	
	250 Cesara Estates Or	<u></u>
-	City/State and Zip Code 1 roque 213 @ gmail. Com E-mail address: (to be used for future annual report notifica	ution)
For further information conc		2021 SE
Luis A	reson this matter, please call: $\frac{2que}{Area Code} = \frac{363}{Area Code} = \frac{409 - 3}{Area Code}$	SECRETARY OF PH
Name of Pe	rson Area Code Daytime T	
Enclosed is a check for the fo	ollowing amount:	To 25
\$25.00 Filing Fee (☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & Certificate of Status	S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compar (A Florida Limited L	Solutions	LUC
(Same of the Limited Liability Compar (A Florida Limited L	iability Company)	ecorus.)
The Articles of Organization for this Limited Liability Company Plorida document number 190004519	were filed on $\frac{1}{\sqrt{0.2}}$	1209 and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:	
Straight Cut (aun Ser The new name must be distinguishable and contain the words "Limited Liabili	vice LLC	
The new name must be distinguishable and contain the words "Limited Liabili	ity 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)	250 (esaro Mulberry, F	Estates Ur.
	Mulberry	L 3399-98
Enter new mailing address, if applicable:		74 -
(Mailing address MAY BE A POST OFFICE BOX)	250 Cesar Mulberry	* ***
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	I.L.
	Enter Florida street a	
	City	

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 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>	Name	Address	Type of Action
			□ Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
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		TAL	Zi Charlige
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