19000036906

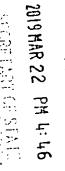
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400326489054

U3/22/19--U1013--U12 **25.00



COVER LETTER

	Registration S Division of Co						
SUBJEC		NEW EDITION LAWN CARE LLC					
		Name of Lin	nited Liability Company				
The encle	osed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please re	turn all correspo	ondence concerning this matter	to the following:				
		RODOLFO CRUZ					
			Name of Person				
		1231 DAMEN ST E	Firm/Company		ب		
		LEHIGH ACRES, FL 3397	Address		APPHIN 2019 HAR 22 2019 HAR 22		
City/State and Zip Code rudycruz1715@gmail.com					2 四部		
For furthe	er information c	E-mail address: (concerning this matter, please c	to be used for future annual report notif	fication)	和 PH ····································		
RODOL	FO CRUZ		239 298-3233				
	Name o	of Person		: Telephone Number			
Enclosed	is a check for th	he following amount:					
\$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of Certified Copy (additional copy i	Status &		

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RODOLFO CRUZ				
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on 02/05/2019	and assigned		
Florida document number L19000036906				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liah	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	e abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1231 DAMEN ST E			
(Principal office address MUST BE A STREET ADDRESS)	LEHIGH ACRES, FL 33974	2019		
		<u> </u>		
Enter new mailing address, if applicable:	1231 DAMEN ST E	FILED PAR 22		
(Mailing address MAY BE A POST OFFICE BOX)	LEHIGH ACRES,FL 33974			
		24		
		5		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, <u>ent</u> <u>e</u> :	er the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
	City	Zin 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 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	ARACELI PEREZ HERNANDEZ	1231 DAMEN ST E LEHIGH ACRES,FL 33974	
			Add
			■ Remove
			□ Change
			🗅 Add
			☐ Remove
			
		 -	
			D.Remode
			PILED FILED FILED Change of the Control of the Cont
			□ Add
			□ Remove
			☐ Change
			
		-	Remove
		· · · · · · · · · · · · · · · · · · ·	Change
·-			
			Remove
			□ Change

		"		
		· · · ·	· ··	
				
				<u> </u>
•				
			<u> </u>	 .
+ ***			•	
		 .		7.2
				19 HAR 22
· · · · · · · · · · · · · · · · · · ·	 			22
				<u> </u>
		<u> </u>		필의 등
				5
				
Effective date, if other than the date fan effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	specific and cannot be pr does not meet the app	licable statutory filinį	(optional pre than 90 days after filing requirements, this days	ng.) Pursuant to 605.020
ne record specifies a delayed el The 90th day after the record	fective date, but i is filed.	not an effective t	me, at 12:01 a.m	i. on the earlier o
MARCH 19TH	2019			
Janen	-> · ->	 •		
Dated				
Acum	nature of a member or au	thorized representative	of a member	

Page 3 of 3

Filing Fee: \$25.00