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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Clean and Green Land Scape LCC
Name of Cinuted Unbility Company
The enclosed Articles of Amendment and fee(s) are submitted for filing
Please return all correspondence concerning this matter to the following.
Brian I Srow CRA Name of Person
TAX Prep LLC
7 Firm Company
39 SW 10th Terrace
Support & Boca TAx Prep, com E-mail address (to be used for luture annual report notification)
Support @ Boca TAx Prep, com
E-mail address (to be used for luture annual report notification)
For further information concerning this matter, please call.
Anterior Guerrier at 1954, 825-8375 Name of Person Area Code Daytime Telephone Number
Same of Pelson Academic Palymine Pelsonale Summer
Enclosed is a check for the following amount.
**Z \$25.00 Filing Fee
Mailing Address: Street Address: Property of the control of the

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

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 Company (A Florida Limited Liability Company (A Florida document number 4 9 00 00 40913	any as it now appears on Laability Company)	our records.)	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited lial</u>	oility company here:	N/A	
The new name must be distinguishable and contain the words "Limited Emb		ation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:	same		
(Principal office address MUST BE A STREET ADDRESS)			
		£ 	2019
Enter new mailing address, if applicable:	N/A	[- -	
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	
		1.	411 9:
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our recor	ds, enter the name	0
Name of New Registered Agent:	9		
New Registered Office Address:	ug-=		<u> </u>
	Enter Florida s.	treet address	
		Florida	

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.

Circ

Zip Code

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> 1 ale</u>	<u>Name</u>	Address	Type of Action
MGR	Brian Isrow	39 SW 10th Ferr Boca, FC 33486	□Add
		Boca, FC 33486	Remove
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Filing Fee: \$25.00