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CEPARTHENT OF STATE
PARTISION OF CORPORATION
TALL ANALYSISE EL CHIRD

FEB 10 2020 S. YOUNG

COVER LETTER

	ion Section of Corporations	
	DLOVERS LANDSCAPING LLC	
SUBJECT: _	Name of Limited Liability Company	
The enclosed A	les of Amendment and fee(s) are submitted for filing.	
Please return al	rrespondence concerning this matter to the following:	
	MARLA COPELAND ESTY	
	Name of Person	
	EASY TAX AND ACCOUNTING	
	Firm/Company	
	P O BOX 2066	
	Address	
	HIGH SPRINGS FL 32655	
	City/State and Zip Code	
	easytax@windstream.net E-mail address: (to be used for future annual report notification)	
For further info	ation concerning this matter, please call:	
MARLA COP	AND ESTY 386 454-8959 at ()	
	Name of Person Area Code Daytime Telephone Number	_
Enclosed is a cl	s for the following amount:	
≘ \$ 25.00 Fili	Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Certificate of Status Certified Copy Certificate of radditional copy is enclosed) Certified Cop radditional copy	Status &
Regis Divis P.O.	Address: tion Section of Corporations x 6327 See, 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

LANDLOVERS LANDSCAPING	LLC		
(Name of the Limit	led Liability Compa (A Florida Limited l	ny as it now appears on our reco Liability Company)	(1) C = 1
The Articles of Organization for this Limited L Horida document number し19000006418 9 とど		were filed on 03/06/2019	TO and assigned
his amendment is submitted to amend the foll			
		: Na	
. If amending name, enter the new name o	t the limited hab	inty company nere:	
he new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS)		JOHN L DAVIS JR	
		25346 NW 7TH AVE	
12 11 11 11 11 11 11 11 11 11 11 11 11 1		NEWBERRY FL 32669	
inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		LANDLOVERS LANDSCA	APING LLC
		25346 NW 7TH AVE	
		NEWBERRY FL 32669	
. If amending the registered agent and/or agent and/or the new registered office addre			er the name of the new registe
Name of New Registered Agent:	JOHN L DAVIS JK		
New Registered Office Address:	25346 NW 7TI		- Januari
	\ 19754 14N 27 6N 6N - 1	Enter Florida street odd	
	NEWBERRY	, 1	Florida <u>32669</u>

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.

City

f Changing Registered Agent/Signature of New Registered Agent

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>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JOHN L DAVIS, JR	25346 NW 7TH AVE	= Add
		NEWBERRY, FL 32669	□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		-	□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
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Note:	ce date, if other than the date of filing:
the record	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 d.
Dated _	Jan 19. 2020. John LD avis 92. Signature of a member or authorized representative of a member
	Ogh, (Days or.
	Signature of a member or authorized representative of a member
	JOHN L DAVIS JR
	Typed or printed name of signer

. . . .

Filing Fee: \$25.00