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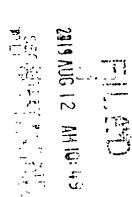
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COVER LETTER

Registration Section
Division of Corporations

TO:

subject: A 🕻	K Lawnsen Name of Limi	VICE and Main ited Liability Company	tenance LLC
The enclosed Articles of	Amendment and fec(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kathleen	Name of Person	<u>) </u>
	A&K Lawr	1 Services and Firm/Company	1 Maintenance LL
	8230 51	x Pence Dr	
	Pensacolo alm3Ki E-mail address: (i	City/State and Zip Code d 5 2 @ 9 Mail to be used for future monual report notif	COM.
For further information c	oncerning this matter, please ca	all:	
Kat hy	Godwin Person	at (\$50) 346 Area Code Daytime	- 3 4 79 2 Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A&K Lawn S	pervice and Maintenance LL
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co.	ompany were filed on $3 - 11 - 19$ and assigned 186 .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: \vec{N}	Λ
(Principal office address MUST BE A STREET ADDR.	ESS)
Enter new mailing address, if applicable: N/A	
(Mailing address MAY BE A POST OFFICE BOX)	宝 一
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	ered office address on our records, enter the name of the 1
N/A	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida City Zip 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 a 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 ador removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Kathleen L. Godwn	8230 5/x Pence Dr.	d Add
		Pensacola, FL 32514	🗆 Remove
			□ Change
			
			□ Remove
			☐ Change
			Add
			Remove
			Change
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(If an ef <u>Note:</u>	ive date, if other than the date of filing: 8 - 9 - 19 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	Kathler I Dodwen
	Signature of a member or authorized representative of a member Kathleen L. Godwin Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00