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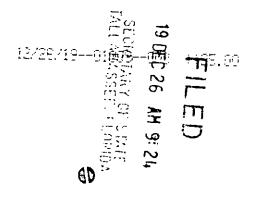
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Green Capital of Florida, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nathaniel E. Green, Sr. Name of Person
Nathaniel E. Green, P.A.
3201 West Commercial Blud.,#228
Fort Laudendale, FL 33309 City/State and Zip Code
nate enate over pa. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Sv. at (954) 946-2752 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address: Street Address:

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

Green Capital (Name of the Limited Liabil	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability (Florida document number <u>L 1900021206</u>	Company were filed on $08/20/2019$ and assigned 0.1 .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lin	nited Liability Company." the designation "L.L.C." or the abbreviation L.L.C."
Enter new principal offices address, if applicable:	A B T
(Principal office address MUST BE A STREET ADDI	RESS)
Enter new mailing address, if applicable:	—————————————————————————————————————
(Mailing address MAY BE A POST OFFICE BOX)	ap 1.
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, enter the name of the new registered
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 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

Title	Name		Type of Action
MGR	Nathaniel E. Green, Sr	6276 Harbor Bend : Margate, FL 33063	Ø Add
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Filing Fee: \$25.00