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	Fax Number	: (850)617-6383		97. 97.
From:				
	Account Name	: ROBERT D. ROYSTON, JR., P.A.	•	3
	Account Number	: 120150000047	•	
	Phone	: (239)205-2225	•	5
	Fax Number	: (239)205-2016		0 !
**F	nter the email :	address for this business entity to b	e used for future	
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Page: 2 of 4

03/26/2020 12:10 PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liab (A Flori	ility Company as it now appears on our reda Limited Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Florida document number 1.20000059555	Company were filed on February 21,	2020	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company here:		
Up to Parr Lawn & Landscape LLC			
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation	"LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:		\$6	20
(Principal office address MUST BE A STREET ADI	DRESS)	· = .	- C(20)=
			R II
		. •	5
Enter new mailing address, if applicable:		•. 	P 17:
Mailing address MAY BE A POST OFFICE BOX)		<u></u>	<u>2</u>
Franke united with Billing Oliver Control of the Billing		() ()	0
B. If amending the registered agent and/or register agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	red office address on our records, e		of the new registe
		, Florida	
_	Ciφ	_,, - , , , , , , , , , , , , , , , , ,	Zip Code
New Registered Agent's Signature, if changing Registe	ered Agent:		
I hereby accept the appointment as registered ages provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	l complete performance of my dution I agent as provided for in Chapter : ered office address, I hereby confit	es, and Lam fai 605, F.S. Or. if	miliar with and "this document is

If Changing Registered Agent, Signature of New Registered Agent

			•
From:	Rob	Royston	

m: Rob Royston Fax: 12392052225 To: Fax: (850) 617-6383 Page: 3 of 4 03/26/2020 12:10 PM

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the I	st be specific and can lock does not meet	the applicable stat	filing or more than s utory filing require	(optional) 0 days after filing.) Pur- iments, this date will	ruant to 605.0207 (. not be listed as th
ne record specifies a delayed effecti ord is filed.	ve date, but not an o	effective time, at 1	2:01 a.m. on the ec	irlier of: (b) The 901	h day after the
Dated March 26	2	2020			
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