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## **COVER LETTER**

TO:

Registration Section

Div	ision of Cor	porations			
3.1		ATION & LANDSCAPE LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		Luis E Ramirez			
			Name of Person		
			Firm Company	<del> </del>	
		11050 SW 196 ST# 408			
		0.41151525.127	Address		
		Cutler Bay F1 33157	City/State and Zip Code		
		lyirrigationlandscape@gma	·		
			to be used for future annual report no	tification)	
For further in	nformation c	oncerning this matter, please c	all.		
Luis E Rami	uis E Ramirez		239 234-8994 at ()		
	Name o	f Person	Area Code Daytii	me Telephone Number	
inclosed is a	check for th	ne following amount:			
■ \$25,00 F	filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address:		Street Address:			
Registration Section Division of Corporations			<del>_</del>	Registration Section Division of Corporations	
P.O. Box 6327			The Centre of	The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monre	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

3 ...

LY IRRIGATION & LANDSCAPE LLC	() Allo 11 -	
(Name of the Limited Lia) (A Flor	<del>bility Company as it now appears on our recor</del> rida Limited Liabibty Company)	<u>aγ</u> Σ: <u>30</u>
The Articles of Organization for this Limited Liability Florida document number <u>L20000108981</u>		and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	limited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD.	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
and the state of t		
B. If amending the registered agent and/or registe agent and/or the new registered office address here		r the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	ESS
		lorida
	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

<u>Title</u>	<u>Name</u>	Address 2.13 AU 11 Fil 5: 49	Type of Action
MGR	Luis E Ramirez	11050 SW 196 ST# 408CUTLER BAY, FL 33157	<b>=</b> Add
			□Remove
			□ Change
MGR	Yanely Valdes	11050 SW 196 ST# 408CUTLFR BAY, FL 33157	<b>=</b> Add
			LIRemove
			!_Change
President	Luis E Ramirez	11050 SW 196 ST# 408CUTLER BAY, FL 33157	Add
			<b>≡</b> Remove
			TChange
VP	Yanely Valdes	11050 SW 196 ST# 408CUTEER BAY, FL 33157	
			Change
			Add
			Change
			[]Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 1. 1. 1. 1. 1. 1. 5:49 E. Effective date, if other than the date of filing: (optional) (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If 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 record is filed. Dated 08/03/2020 Signature of a member or authorized representative of a member Luis E Ramirez

Typed or printed name of signee