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COVER LETTER

TO:

Registration Section
Division of Corporations

ESMERA SUBJECT:	LDA LANDSCAPING LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	HEIDY LEMUS		
	-	Name of Person	
	ESMERALDA LANDSCA	APING LLC	
		Firn/Company	
	3424 SW 29th ST		
		Address	
	LAUDERDALE LAKES	FLORIDA 33311	
		City/State and Zip Code	
	ZOSMORALES@GMAIL		
	E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please c	all:	
HEIDY LEMUZ		954 793-6024 at ()	
Name	of Person	Area Code Daytime Telephone Number	
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is e	atus &
Mailing Address Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(Name of the Lim	ited Liability Company as it now as (A Florida Limited Liability Compa	opears on our records.) iny)	
The Articles of Organization for this Limited I Florida document number L20000142660	Liability Company were filed on	n 05/26/2020 and assigned	
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability compan	<u>y here</u> :	
N/A			
he new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."	
Inter new principal offices address, if appli	cable: N/A		
<u> Principal office address MUST BE A STRE</u>	ET ADDRESS)	<u> </u>	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE			
 If amending the registered agent and/or gent and/or the new registered office address 	~	ur records, <u>enter the name of the new regist</u>	
Name of New Registered Agent:	EDIN OSWALDO VASQUEZ MARTINEZ		
New Registered Office Address:	3424 SW 29th ST		
	Ente	r Florida street address	
	LAUDERDALE LAKES	. Florida 33311	
	City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

DOMED AT DATE AND COMBINE LESS

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 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	Type of Action
VP	EDIN OSWALDO VASQUEZ MA	3424 SW 29th ST,LAUDERDALE LAKES FL 3331	1 ≡ Add
			□Remove
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ESMERALDA LANDSCAF	ING LLC			
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fective date, if other than the	date of filing:		(optional)	
an effective date is listed, the date mu ote: If the date inserted in this b				
ocument's effective date on the D			•	
record specifies a delayed effective	e date, but not an effective t	time, at 12:01 a.m. on t	the earlier of: (b) The	90th day after the
is filed.				
ALIGUET: 36	2020			
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