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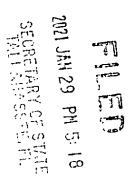
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3/19/21

COVER LETTER

TO:

Registration Section Division of Corporations

ANTONIO LAWN GARDEN LLC SUBJECT: 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: NOEL ANTONIO HERNANDEZ YANES Name of Person ANTONIO LAWN GARDEN LLC Firm/Company 1806 SHERMAN AVENUE Address IMMOKALEE FL 34142 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: NOEL ANTONIO HERNANDEZ YANES Daytime Telephone Number Name of Person Enclosed is a check for the following amount: S25.00 Filing Fee □ \$30.00 Filing Fee & S55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)



2021 JAN 29 PM 5: 18

SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company	were filed on 06/08/2020	and assigned
Florida document number L20000155312		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		- 11 (
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, enter the nam	ne of the new registered

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

Name of New Registered Agent:

New Registered Office Address:

ANTONIO LAWN GARDEN LLC

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.

NOEL HERNANDEZ YANES

1806SHERMAN AVENUE

City

IMMOKALEE

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Fłorida 34142
Zip Code

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>	Name	Address	Type of Action
			□Add
			Remove
			Change
			□Add
			□Remove
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	EZ YANES THERE WAS SR. ADDED TO IT THE SR. ALSO NEEDS TO BE
DEMOVED SO IT BEADS AS	
KEMOVED 30 IT KENDS AS	NOEL ANTONIO HERNANDEZ YANES.

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	e specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 k does not meet the applicable statutory filing requirements, this date will not be listed as the
ne record specifies a delayed effective d ord is filed.	date, but not an effective time, at \$2:01 a.m. on the earlier of: (b) The 90th day after the
26 JANUARY Dated	2021
1 Atula	gnature of a member or authorized representative of a member

. . . .

Filing Fee: \$25.00