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## **COVER LETTER**

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SHRIF	ст. А	SC LAW	/N AND LANDSCAPIN	NG LLC						
SUBJE	ci. <u>~·</u>									
The enc	losed Ai	ticles of A	mendment and fee(s) are sub	mitted for filing.						
Please ro	eturn all	correspon	dence concerning this matter	to the following:						
			GUILLERMINA A DIAZ							
				Name of Person						
			<del> </del>	Firm/Company						
	BIFCT: ASC LAWN AND LANDSCAPING LLC  Name of Limited Liability Company  et enclosed Articles of Amendment and fee(s) are submitted for filing.  Case return all correspondence concerning this matter to the following:    GUILLERMINA A DIAZ									
				Address						
				· · · · · · · · · · · · · · · · · · ·						
			aenlas	-	ail com					
For furth	ner infor	mation co	neerning this matter, please of	all:						
		GUILLE	RMINA A DIAZ							
		Name of I	Person	Area Code Daytir	ne Telephone Number					
Enclose	d is a ch	eck for the	following amount:							
□ \$25	.00 Filin	ıg Fec		Certified Copy	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					
				· · · · · · · · · · · · · · · · · · ·						
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		on of Co Box 6327	-	The Centre of	-					
	Tallah	assee, Fl	_ 32314	2415 N. Monro Tallahassee, Fl	oc Street, Suite 810 L 32303					

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## ASC LAWN AND LANDSCAPING LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization	for this Limited Liability Company	were filed on	JUNE 18,2020	and assigned
Florida document number _	L20000169145			
This amendment is submitte	d to amend the following:			
A. If amending name, ento	er the new name of the limited liabi	lity company her	<u>e</u> :	
The new name must be distinguis	nable and contain the words "Limited Liabili	ty Company," the des	ignation "LLC" or the abb	reviation "L.L.C."
Enter new principal office	address, if applicable:			<u> </u>
(Principal office address M	<u>UST BE A STREET ADDRESS)</u>			
			<del></del>	
Enter new mailing address	, if applicable:			
(Mailing address MAY BE	<u>A POST OFFICE BOX)</u>			
B. If amending the registe agent and/or the new regis	red agent and/or registered office a	ddress on our red	ords, <u>enter the name</u>	of the new registered
agent and/or the new regis	tered office address here.			
Name of New Reg	stered Agent:			
New Registered O	Tice Address:			
-		Enter Floria	la street address	<u> </u>
	<del></del>		, Florida	<del></del>
		Citv		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 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 18 11 11 11 19	Type of Action
MGR	GUILLERMINA A DIAZ	1265 US HWY 17 S	
		FORT MEADE, FL 33841	□ Remove
		<del></del>	
			□Remove
			□Change
	<del></del>	<del></del>	
			□Remove
			Change
			Remove
		<del></del>	Change
<del></del>			□Add
			[]Remove
			□ Change
			□ Remove
			□ Change

Effective date, if other than the date of filing:								<del></del> -	<del></del>	18	, , , , , , , , , , , , , , , , , , ,	1.10	
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Dated Sptember 14. 2020.	If an effecti <u>Note:</u> If	ive date is liste the date inse	ed, the date marted in this	ust be specifi block does :	c and canot me	annot be pr et the app	ior to date e licable sta	of filing or n		) days afte	r filing.) P		
Dated September 14. 2020.			layed effect	ive date, bu	t not ar	n effective	e time, at	12:01 a.m.	on the ear	lier of: (	b) The S	90th day afte	r the
· · · · · · · · · · · · · · · · · · ·	Dated	Septe	n bev	14		201	<u>o</u> .						
Signature of member or authorized representative of a member				Signature	)h	mber or at	fu ithorized re	presentative	e of a memi	ber	<del></del> -		