LZ0000179037

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(Business Entity Name)
(Document Number)
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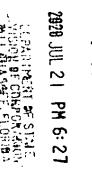
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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	terpises of Sarasota, L.L.C.		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
	Robert R Gardner		
		Name of Person	
		Firm/Company	
	5412 Ruby Ln.		
		Address	
	Sarasota, Florida 34231		
	gardnerenterprisellc@gmail		
	E-mail address: ()	o be used for future annual repo	rt notification)
For further information of	concerning this matter, please co	all:	
Robert Gardner		941 600-19 at ()	36
Name o	of Person	Area Code D	Daytime Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address	
Registration Division of 0		Registratio Division o	on Section f Corporations
P.O. Box 633			e of Tallahassee

2415 N. Monroe Street, Suite 810

Tellaharries PL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gardner Enterpises of Sarasota, L.L.C. (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 26, 2020 Florida document number L20000179037 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Gardner Enterprises of Sarasota, L.L.C. The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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	Type of Action
			□Add
			□ Remove
			☐ Change
			□Add
			□Remove
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record specifies a delayed is filed.	d effective date, bu	ut not an effec	tive time, at 12:0)1 a.m. on the ea	arlier of: (b) T	ne 90th day after t he
		2020				
July 13 ated						
ated July 13	////		7			

Filing Fee: \$25.00