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COVER LETTER

TO:	Registration Se Division of Co		*				
SUBJ	Vincen	t and Ciara property and Hom	e preservation lawn servi	ce LLC			
3000	<u></u>	Name of Lim	ited Liability Company				
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
			Sonia Becerra				
			Name of Person				
			Swyft Filings, LLC				
			Firm/Company				
		3 Gr	1320				
			Address				
			Houston, Texas 770	15			
			filings@swyftfilings.co				
		E-mail address: (to be used for future annual r	report notification)	(.5	~>	
For fu	rther information o	concerning this matter, please co	all:		IA.	2020 SEP	
	Sonia E		at (<u>877</u>)	777-0450 Daytime Telephone	<u>に</u> かて・) EP 2	- 1
	Name c	of Person	Area Code	Daytime Telephone	e Number	P	· · · · · · · · · · · · · · · · · · ·
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⊠ \$2	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl	oral) (60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclos		

MAILING ADDRESS:

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vincent and Ciara property and Home preservation lawn service LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 07/27/2020 The Articles of Organization for this Limited Liability Company were filed on _ and assigned L20000222283 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Vincent and Dominique property and Home preservation lawn service LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 Florida

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>	Name	Address	Type of Action
AMBR	Ciera Johnson	435NE146THST	Add
		MIAMI, FL 33161	₽ Remove
AMBR	Dominique Myles	435NE146THST	5√ Add
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