LZ0000 276328

(Re	questor's Name)	-
(Ad	dress)	
(Δα	dress)	
(710	uicssy	
(Cit	y/State/Zip/Phone	e #)
—		
DICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
•	·	,
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Eiling Officer	
Special instructions to	Filing Officer.	

Office Use Only



400353403024

1849-96694--699 ******25.05

6.76.77 ... 5:19

→ SIMMONS NOV 1 9 2020

COVER LETTER

TO:	Registrati Division o				
CHD IE		LAWN	CARE, LLC	•	•
Name of Limited Liability Company					
The encl	losed Articl	les of A	mendment and fee(s) are sub	mitted for filing.	
Please re	eturn all cor	теѕрово	lence concerning this matter	to the following:	
			ORLANDO MARTINEZ		
				Name of Person	
			NYO LAWN CARE, LLC		
Firm/Company				**	
	1349 BOREAS DR				
				Address	
			ORLANDO, FL 32822		
				City/State and Zip Code	
			nyolawncare@gmail.com		114
For furth	her informa	tion cor	e-mail address: (to be used for future annual report no all:	mication)
ORLAN	NDO MART	ΓINEZ		407 458-6943	
	N	lame of F	Person	Area Code Dayti	me Telephone Number
Enclosed	d is a check	for the	following amount:		
■ \$25	.00 Filing F	ee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Address:	action		
Registration Section Division of Corporations		•	Registration Section Division of Corporations		
P.O. Box 6327		The Centre of	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monr	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NYO LAWN CARE, LLC

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

(A Florida Limited	Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L20000276328	y were filed on 09/04/2020	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" of	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 agent and/or the new registered office address here:	address on our records, enter th	e name of the new registered	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Flori	ida	
	City .	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 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 12.00. 10 211 5: 19	Type of Action
MGR	Orlando Martinez	1349 Boreas Dr.	🗆 Add
		Orlando, FL 32822	□Remove
			Change
		·····	🗆 Add
			□Remove
			□Change
			□Add
			🗆 Кеточе
			Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			DAdd
			Петоче
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated ___ SEPTEMBER 30, 2020 Signature of a member or authorized representative of a member ORlando Marlinez
Typed or printed name of signee