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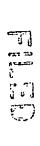
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COVER LETTER

p 4

Tallahassee, FL 32314

TO: Registration S Division of Co					
EL LLAN SUBJECT:	O LANDSCAPE LLC				
SUBJECT,	Name of Lin	nited Liability Company	.		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	ALMA D SANCHEZ TO	MAS		2025 TALI	
		Name of Person			
	EL LLANO LANDSCAP	E LLC		₹22	
		Firm/Company		- H	
	4512W.MINNEHAHA S	r		2025 APR 22 PH 3: 49	
		Address		- j.ä Te	
	TAMPA FL 33614				
		City/State and Zip Code		_	
	Elllanotampalandscape@gr	mail.com to be used for future annual i			
For further information	concerning this matter, please c		epore normeanom		
ALMA D SANCHEZ T	OMAS	813 507	77804		
Name	of Person	Area Code	Daytime Telephone Number	<u> </u>	
Enclosed is a check for t	the following amount:				
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl	Certifica osed) Certified	ite of Status &	
Mailing Addre		Street Ad			
Registration Division of C			tion Section of Corporations		
P.O. Box 631		The Centre of Tallabasses			

2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

- O

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Plorida document number 1.20000361815	were filed on NOVEMBER/16/20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
LEGACY OUTDOOR DESIGN LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4512 W.MINNEHAHA ST	
Principal office address MUST BE A STREET ADDRESS)	TAMPA FL 33614	
Inter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>		2025 APR 22 PH 3
 If amending the registered agent and/or registered office agent and/or the new registered office address here: 	address on our records, <u>enter th</u>	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da

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

CLILIANO LANDSCADELLO

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:

or remove	ea trom our records:		
MGR =	Manager		
$\Delta MRR =$	Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□Remove
			□Change
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l'an ef No <u>te:</u>	ive date, if other than the date of filing: (optional) (decive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020° If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as sent's effective date on the Department of State's records.	
recor d is fi	d 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 led.	
Dated	04/09/2025	
ziiiCU		
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00

Typed or printed name of signee

Dear Officer, my name is Alma D Sanchez Tomas. I am only writing this letter to explain the confusion I have with my business, my husband and I opened a company with the name of El Llano Landscape LLC on 11/16/2020 which was effective on 01/01/2021, the document number is L20000361815

EIN 85-4203516

We decided that we wanted to change the name because we no longer do landscaping, and we wanted to change it to Legacy outdoor design LLC since we are dedicated to renovating patios and we want to reach more customers.

I called Sunbiz to tell me the steps to change the name of my existing company but they told me that the easiest thing was to close El Llano and open a new one with the new name of Legacy. I didn't like the idea very much but I did it because I thought it would be easy, I sent a letter to the IRS to notify them to update the EIN number with the new name and they approved it. When I went to my bank to notify them of the change they told me that they could not do it and that I had to make a new account and that all the credit I had with El Llano Landscape would not be considered for the new company. They told me that if I wanted to continue keeping everything I have achieved with the account I have to reopen the Llano landscape and make the change so that all the credits passed to the new company. That's why I am sending the evidence of The Statement of revocation of dissolution, The amendment Form, and the dissolution form of my new company, so I can use the name, the IRS confirmation Letter with the new company name and the 2 checks, \$100 & \$30, sorry for this confusion and thank you for your understanding and helping me in this situation.

State of Florida Department of State

I certify from the records of this office that EL LLANO LANDSCAPE LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on November 16, 2020, effective January 01, 2021.

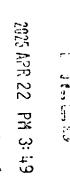
The document number of this company is L20000361815.

I further certify that said company has paid all fees due this office through December 31, 2020, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

Authentication Code: 201125163102-500355224455#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty Fifth day of November, 2020



Date of this notice: 12-09-2020

Employer Identification Number:

85-4203516

Form: SS-4

Number of this notice: CP 575 G

ALMA DELIA CANCHEZ EL LLANO LANDSCAPE SERVICE 4512 W MINNEHAHA ST TAMPA, FL 33614

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 85-4203516. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

when filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a dolay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and clost to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 9922.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTT/TDB 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- * Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is SANC. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

FILED Jan 17, 2025 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

EL LLANO LANDSCAPE LLC

The document number of the limited liability company: L20000361815

The file date of the articles of organization: November 16, 2020

A description of occurance that resulted in the limited liability company's dissolution:

LDECIDED TO CHANGE MY BUSINESS NAME AND LWILL OPEN A NEW ONE WITH A DIFFERENT MANE.

The name and address of the person appointed to wind up the company's activities and affairs:

ALMA SANCHEZ 4512 W.MINNEHAHA ST TAMPA, FL 33614 33

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: ALMA D SANCHEZ

Electronic Signature of authorized person

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Detail by Entity Name

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Florida Limited Liability Company EL LLANO LANDSCAPE LLC

Filing Information

Document Number

L20000361815

FEI/EIN Number

85-4203516

Date Filed

11/16/2020

Effective Date

01/01/2021

State

FL

Status

INACTIVE

Last Event

VOLUNTARY DISSOLUTION

Event Date Filed

01/17/2025

Event Effective Date

NONE

Principal Address

4512 W MINNEHAHA ST

TAMPA, FL 33614

Mailing Address

4512 W MINNEHAHA ST

TAMPA. FL 33614

Registered Agent Name & Address

SANCHEZ, ALMA D

4512 W MINNEHAHA ST

TAMPA, FL 33614

Authorized Person(s) Detail

Name & Address

Title MANAGER

Sanchez, Alma D

4512 W MINNEHAHA ST

TAMPA, FL 33614

Annual_Reports

Report Year	Filed Date
2022	01/12/2022
2023	02/01/2023
2024	01/27/2024

Document Images

ALMA D SANCHEZ OWNER EL LLANO LANDSCAPE LLC 4512W.MINNEHAHA ST TAMPA, FL 33614 01/23/2025

RE: Business Name Change

Dear IRS Representative:

The purpose of this letter is to inform you that EL LLANO LANDSCAPE LLC EIN#,85-4203516 has recently changed it's name to LEGACY OUTDOOR DESIGN LLC, Effective date 01/17/2025

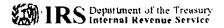
Please update your records to reflect this change.

Attached is a copy of the official state filing document confirming the name change.

Please confirm once our records have been updated to reflect the new business name

Sincerely,

ALMA D SANCHEZ OWNER EL LLANO LANDSCAPE LLC (813)507-7804



OGDEN UT 84201-0038

In reply refer to: 0457645572 Apr. 01, 2025 LTR 147C 0 85-4203516 000000 00

00009432

BODC: SB

ALMA DELIA SANCHEZ LEGACY OUTDOOR DESIGN 4512 W MINNEHAHA ST TAMPA FL 33614-3640



033300

Employer identification number: 85-4203516

Dear Taxpayer:

Thank you for your inquiry of Mar. 21, 2025.

Your employer identification number (EIN) is 85-4203516. Please keep this letter in your permanent records. Enter your name and EIN on all federal business tax returns and on related correspondence.

You can get any of the forms or publications mentioned in this letter by visiting our website at IRS.gov/forms or by calling 800-TAX-FORM (800-829-3676).

If you have questions, you can call us at 800-829-0115.

If you prefer, you can write to us at the address at the top of the first page of this letter.

When you write, include a copy of this letter, and provide your telephone number and the hours we can reach you in the spaces below.

Telephone r	number	()	Hours	
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Keep a copy of this letter for your records.

Thank you for your cooperation.

Electronic Articles of Organization For Florida Limited Liability Company

L25000033546 FILED 8:00 AM January 17, 2025 Sec. Of State mhhitchcock

Article I

The name of the Limited Liability Company is: LEGACY OUTDOOR DESIGN LLC

Article II

The street address of the principal office of the Limited Liability Company is:

4512 W.MINNEHAHA ST TAMPA FL, . 33614

The mailing address of the Limited Liability Company is:

4512 W.MINNEHAHA ST TAMPA FL. FL. UN 33614

Article III

The name and Florida street address of the registered agent is:

ALMA D SANCHEZ 4512 W.MINNEHAHA ST TAMPA FL., FL. 33614

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: ALMA D SANCHEZ

FILED Apr 09, 2025 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

LEGACY OUTDOOR DESIGN LLC

The document number of the limited liability company: L25000033546

The file date of the articles of organization: January 17, 2025

The effective date of the dissolution if not effective on the date of filing: April 9, 2025

A description of occurance that resulted in the limited liability company's dissolution:

I OPENED THIS COMPANY, FOR WRONG INFORMATION, WHAT I WANTED TO DO WAS JUST CHANGE THE NAME TO MY EXISTING COMPANY, I ALREADY MADE THE FORM OF AMENDMENT AND I NEED TO RELEASE THE NAME SO I CAN USE IT.

The name and address of the person appointed to wind up the company's activities and affairs:

ALMA D SANCHEZ TOMAS 4512 W. MINNEHAHA ST TAMPA, FL 33614

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: ALMA D SANCHEZ TOMAS

Electronic Signature of authorized person

State of Florida Department of State

I certify from the records of this office that LEGACY OUTDOOR DESIGN LLC was a limited liability company organized under the laws of the State of Florida, filed on January 17, 2025.

The document number of this limited liability company is L25000033546.

I further certify that said limited liability company was voluntarily dissolved on April 9, 2025, effective April 9, 2025.

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Twelfth day of April, 2025



Secretary of State

Authentication ID: 000448478380-041225-L25000033546

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

https://efile.sunbiz.org/certauthver.html