L210000 19562

(Req.	uestor's Name)	
(Addi	ress)	
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(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doc	ument Number)	
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Special Instructions to Fi	ling Officer:	

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COVER LETTER

TO: Registration Secti Division of Corpo			
SUBJECT: DOWN UN	IDER LAWN AND LAI Name of Limi	NSCAPE, LLC ted Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are sub-	nitted for filing.	
Please return all correspond	ence concerning this matter t	to the following:	
	Processing Departmen	nt	
	Name of Person		
		Firm/Company	
	5605 Riggins Court S	Suite 200	
	ooso Anggino oosit t	Address	
	Reno, NV 89502		
	returndocs@incau	City/State and Zip Code Ithority.com	
		o be used for future annual report notificat	ion)
For further information con-	cerning this matter, please ca	di:	
Processing Department Name of Person		at (800) 638-2320 Area Code Daytime Telephone Number	
Name or r	erson	Area Code Dayline re	icinanic Annuact
Enclosed is a check for the	following amount:		
S25.00 Filing Fee	S30.00 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:

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

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



April 13, 2021

PROCESSING DEPARTMENT 5605 RIGGINS CRT STE. 200 RENO, NV 89502

SUBJECT: DOWN UNDER LAWN AND LANSCAPE, LLC

Ref. Number: L21000019562

We have received your document for DOWN UNDER LAWN AND LANSCAPE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 321A00007608

Alecia Rivers Regulatory Specialist II

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DOWN UNDER	LAWN AND LANSCAPE, LLC	
(<u>Name of the Limited Liabili</u> (A florid	ity Company as it now appears on our records a Limited Liability Company)	<u>.</u>]
The Articles of Organization for this Limited Liability C Florida document number L21000019562	ompany were filed on 01/06/21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
DOWN UNDER LAWN AND LANDSCAPE, I	LLC	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET ADDI	RESS)	T-2-1-1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		,
Gen ingisiere Crine Addies.	Enter Florida street address	
	Lia	: ` : rida
	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 Title Name: <u>Address</u> Type of Action _ D Add _____ Change _____ DbΛ □______ Δid _____ Remove ______ D Change _______ Add ☐ Remove _____ Change ______ □ Remove _____ □ Change ______ □ Add _____ П Remove _____ Change ______ П Кетоуе

_____ Change

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Note:	tive date, if other than the date of filing: Elective date is listed, the date must be specific and cannot be. If the date inserted in this block does not meet the ament's effective date on the Department of State's rec	applicable statutory filing requirem	ents, this date will not be listed as the
	cord specifies a delayed effective date, bue 90th day after the record is filed.	it not an effective time, at I	2:01 a.m. on the earlier of:
Dated	02.09 2021		
		dathorized representative of a member	

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Typed or printed name of signer

Filing Fee: \$25.00