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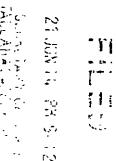
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration S Division of Co							
	andscape Design & Manageme	nent LLC					
SUBJECT:	mited Liability Company						
The enclosed Articles o	f Amendment and fee(s) are sul	ubmitted for filing.					
Please return all corresp	ondence concerning this matter	er to the following:					
	Nickolas Ling						
		Name of Person					
	Genuine Landscape Desig	ign & Management LLC					
		Firm/Company					
	836 10 ct SW						
		Address					
	Vero Beach FL 32962						
		City/State and Zip Code					
	nicklejames37@gmail.com	m (to be used for future annual report notification)					
For further information	concerning this matter, please of	·					
Nickolas Ling		352 421-2003					
Name	of Person	Area Code Daytime Telephone Number					
Enclosed is a check for (the following amount:	₩ _o .					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee. Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)					
Mailing Address: Registration Section		Street Address:					
Division of Corporations		Registration Section Division of Corporations					
P.O. Box 6327		The Centre of Tallahassee					
Tallahassee,		2415 N. Monroe Street, Suite 810					
		Tailahassee, FL 32303					

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Genuine Landscape Design & Managemen		
(<u>Name of the Limited Lial</u> (A Flor	bility Company as it now appears on opr records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability	y Company were filed on June 1, 2021	and assigned
Florida document number June 4, 2021		
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	.imited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD)	DRESS)	
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, enter the nam	e of the new registered
agent and of the new registered office address nert	·	Es N
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
New Registered Agent's Signature, if changing Registe	City	Zip Code
then werightien whent 2 Diringfale, it chausing Resiste	reu 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
MGR	Nickolas Ling	716 12 AVE SW Vero Beach FL 32962	🗏 Add
			□ Remove
			[] Change
			□ Add
			Remove
			Change
			□Add
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Filing Fee: \$25.00