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COVER LETTER

Division of Co	rporations		
	ROUND LANDSCAPING & T	REE SERVICE LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	RICO CLARK		
		Name of Person	
	SOLID GROUND LAND	SCAPING & TREE SERVICE LLC	
		Firm/Company	
	6191 RANGE DR STE 61	81	
		Address	
	DAVIE, FL. 33314		
		City/State and Zip Code	
	bigshotreek@gmail.com		
		to be used for future annual report notifi	
For further information	concerning this matter, please c	all:	
RICO CLARK		954 988-1840 at ()	
Name	of Person		Telephone Number
			1.14 · 15
Enclosed is a check for t	the following amount:		THE K
■ \$25.00 Filing Fee	□ \$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)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Sect	tion

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOLID GROUND LANDSCAPING & TREE SERVICE LLC

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

(A Florida Limited Lia	bility Company)	
The Articles of Organization for this Limited Liability Company w Florida document number L21000356652	ere filed on 08/09/2021	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbre	viation "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 ad		2021
agent and/or the new registered office address here:	dress on our records, enter the name o	i-the new regist
		: S &
Name of New Registered Agent:	ည်း 	T. Yes
New Registered Office Address:	Enter Florida street address	24.2 24.2
	Florido	m №
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office ac- company has been notified in writing of this change.	erformance of my duties, and I am fam ovided for in Chapter 605, F.S. Or, if t	iliar with and his document is

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being a or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Actio
CEO	RICO CLARK	1109 NW 5TH ST APT 1B FORT LAUDERDAL	E. F1 . 333 1 (■ Add
			□ Remove
			Change
VP	DEREKA VARNADO	1109 NW 5TH ST APT 1B FORT LAUDERDAL	E, FI, 33311 ■ Add
			🗆 Remove
			□ Change
			□Add
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Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be prior to Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.) Pursuant to 605.02
record specifies a delayed effective date, but not an effective tim d is filed.	, at 12:01 a.m. on the carlier of: (b) Th	e 90th day after t
0/2/2		
Dated 0/24/21 ,		
Dated \$\langle 24\rangle \rangle \langle \langle \langle 34\rangle \rangle \rangle \langle \langle \rangle \ra		