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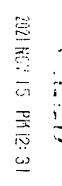
(Re	equestor's Name)	
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(Ad	Idress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

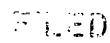
TO:

TO: Registration So Division of Cor			
SUBJECT: <u>Li<i>hle</i></u>	River Landsca, Name of Lim	Oling LLC ited Liability Company	<u></u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Robert Chap	Name of Person	
	Little River L	andscaping LLC Firm/Company	·
	8219 Strasse	1310d. Address	
	Punta Gocda	FL 33982 City/State and Zip Code	
For further information o	E-mail address: (to be used for future annual report noti	fication)
Robert Channel	i <i>Oman</i> I Person	at (<u>941</u>) <u>979-07</u> Area Code Daytim	7/2 e Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.90 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre	Section	Street Address: Registration Se	
Division of C	•	Division of Cor	•
P.O. Box 631 Tallahassee,		The Centre of T 2415 N. Monro	e Street, Suite 810
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Tallahassee. FL 32303

ARTICLES OF AMENDMENT. TO ARTICLES OF ORGANIZATION OF

Little Diver Landscaping 110



Little River La	ndscaping LLC 2021 NOV 1	5 PM 12: 31
(Name of the Lim	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	MSTERE
The Articles of Organization for this Limited I	iability Company were filed on 10-04-21	and assigned
Florida document number <u>L 21000433</u>	826	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE.	ET ADDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office address on our records, <u>enter the</u> ess here:	name of the new register
Name of New Registered Agent:	Robert Chapman	
New Registered Office Address:	\$219 Strasse Blvd Enter Florida street address	
	Punta Gorda Florid	23952 Zip Code
	Punta Gorda Florid	

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>	<u>Name</u>	Address	Type of Action
AMBR	Robert Chapman	8219 Strasse Blud	(JAdd
		Punta Gorda FL 33982	□Remove
			Le Change
		·	\Bdd
			□Remove
			□Change
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f an ci Note:	(optional) fective 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 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
reco d is f	rd 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 field.
Dated	Nov. 9
	Signature of a member or authorized representative of a member

Typed or printed name of signee