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(((H240004110913)))



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To:

Division of Corporations

Fax Number : (850)617-6383

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MINI ALL NATURAL LANDSCAPING LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MINI ALL NATURAL LANDSCAPING LEC	
(Name of the Limited Liability Company as I (A Florida Limited Liability	it now appears on our records.) by Company)
The Articles of Organization for this Limited Liability Company were	filed on and assigned
Florida document number 1.22000137879	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
NATURAL VIEW LANDSCAPING LLC	
The new name must be distinguishable and contain the words "Limited Liability Con-	inpany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
	. ( )
inter new mailing address, if applicable:	·
Mailing address MAY BE A POST OFFICE BOX	
<del></del>	()
<ol> <li>If amending the registered agent and/or registered office address gent and/or the new registered office address here:</li> </ol>	is on our records, <u>enter the name of the new regist</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida struct address
Cip	7 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 und accept the obligations of my position as registered agent as provided for in Chapter 505, 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.

It 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>	Naine	Address	Type of Action
			Add
			□Remove
			Change
			C Remove
<del></del>			C.Aúd
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			Change
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Effective date, if other than the date of filling:    12/13/2019 4   (optimal)		
Effective date, if other than the date of filing:    Ta   13   20 3 4   (optional)		
Effective date, if other than the date of filing:    12/13/20.04 (optional)   Of an effective date is fixed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing 1 Parsuan to 805.0207.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records  the record 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 ord is filed.		
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Dated 10/13 2024  Signature of a member of authorized representative of a member	he record ord is file	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
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