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## **COVER LETTER**

Registration Section

**Division of Corporations** 

Tallahassee, FL 32314

TO:

Please return all correspondence concerning this matter to the following:    Tohnathan Childs   Childs	subject: <u>Sun</u> s	Shine Stat	e Dumster K	Rentals UC
Tohnathan Childs  Childs Landscaping & Property Solutions LCC  Firm/Company  Childs Landscaping & Property Solutions LCC  Firm/Company  Strain Hill Fl 34400  City/State and Zip Code  Childs Landscaping Solutions & Gravil. Con  E-mail address: (to be used of futury/annual report notification)  For further information concerning this matter, please call:  Tohnathan Childs at (727) 505-2554  Area Code Daytime Telephone Number  Enclosed is a check for the following amount:  X25.00 Filing Fee Scrifficate of Status Certificate of Status & Certificate of Stat	The enclosed Articles of Ame	ndment and fee(s) are sub-	mitted for filing.	
Childs Landscaping & Property Solutions LCC Firm/Company  10159 Henderson St.  Address  Sping Hill Fl 3440C  City/State and Zip Code  Childs Landscaping Solutions & Gmail. Com  E-mail address: (to be used for futuryannual report notification)  For further information concerning this matter, please call:  10159 Henderson St.  Address  Sping Foode  Childs Landscaping & Guerrian Solutions & Gmail. Com  E-mail address: (to be used for futuryannual report notification)  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  Asea Code  Certificate of Status & Certificate Copy (additional copy is enclosed)  Mailing Address:  Registration Section  Division of Corporations  Street Address:  Registration Section  Division of Corporations	Please return all corresponden	ce concerning this matter	to the following:	
Sping Henderson St.		Jo	hnathan Ch	ilds
Address  Solutions & Green Sol	<u>(</u>	Childs Land	Scaping & Proper	ty Solutions LLC
E-mail address: (to be used for future/annual report notification)  For further information concerning this matter, please call:    Solution	-	10159 H	tenderson St	<del> </del>
For further information concerning this matter, please call:    Solution	_	Spring	City/State and Zip Code	4608
For further information concerning this matter, please call:    Solution	_	Childslar E-mail address: (1	dscaping Solution of the used for future annual report not	trication) gravil. Con
Enclosed is a check for the following amount:    Solution   Soluti	For further information conce			
S25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certified Copy (additional copy is enclosed)    Mailing Address: Registration Section Division of Corporations   Street Address: Registration Section Division of Corporations	Johnath Name of Pers	ran Childs	at (727) 505 Area Code Daytin	e Telephone Number
Certificate of Status  Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Mailing Address: Registration Section  Division of Corporations  Certified Copy (additional copy is enclosed)  Registration Section  Division of Corporations	Enclosed is a check for the fol	lowing amount:		
Registration Section Registration Section Division of Corporations Division of Corporations	t\$\$25.00 Filing Fee □		Certified Copy	Certificate of Status & Certified Copy
· ·		on	•	ction
	•	orations		•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunshine State	Liability Comput	STEV Ren ny as it now appears or liability Company)	tals LL	<u>C</u>	-	
The Articles of Organization for this Limited Lia Florida document number <u>レススのの178し</u>		were filed on <u>D4</u>	-13-202	<u>}</u> and :	assignec	i
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of the Childs Landscaping & The new name must be distinguishable and contain the work	_			abbreviation	"L.L.C."	
Enter new principal offices address, if applical	ble:	na	_		<u> </u>	
(Principal office address MUST BE A STREET	ADDRESS)	<del></del>				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	nla		2022 DEU		——————————————————————————————————————
B. If amending the registered agent and/or regagent and/or the new registered office address  Name of New Registered Agent:		address on our reco	rds, <u>enter the na</u>	ne of the 1	new reg	i <b>štę</b> red
New Registered Office Address:	Na	Enter Florida	street address			_
		City	, Florida _	<b>Z</b> ір Со	<del>le</del>	—

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>	<u>Address</u>	Type of Action
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			□Remove
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\$P\$			□Add
			□Remove
			☐ Change

(If an ei <u>Note:</u>	fective date, if other than the date of filing:
f the record 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 led.
Dated	November 29. 2002.
	Signature of a member or authorized representative of a member
	7, · · · · · · · · · · · · · · · · · · ·

Filing Fee: \$25.00