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(Re	questor's Name)	<u> </u>
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(Cit	y/State/Zip/Phon	e #)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
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COVER LETTER

TO: Registration So Division of Cor				
	YS MIAMI LLC	•		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	PAUL JASINSKI			4 NO
		Name of Person		- (eas)
		Firm/Company		1 11 6462
	13501 SW 99 ST			-
		Address	1	- ':-
	MIAMI, FL 33186			, ယ ,
		City/State and Zip Code		_
	PAULJASINSKI2@GMAI			
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
PAUL JASINSKI		305 984-8277 at ()		
Name o	f Person		ne Telephone Numbe	r
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &
Mailing Address		Street Address:	nation	
Registration Section Division of Corporations		Registration Se Division of Co		
P.O. Box 632		The Centre of	Fallahassee	
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 8	810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TURF GUYS MIAMI LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our record Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L22000187127	y were filed on <u>05/06/2022</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		, , , , , , , , , , , , , , , , , , , ,
Enter new mailing address, if applicable:		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter</u>	r the name of the new registere
New Registered Office Address:	Enter Florida street addre	W
<u></u>		lorida
	City	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 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 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
MGR	VIVIANA CAPUTO	5960 NW 99 AVE UNIT 5	= Add
		DORAL, FL 33178	□ Remove
		**************************************	□Change
			□Add
			□Remove
			☐Change
			□Remove.
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
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Effective date, if other than the	e date of filing:	(c	ptional)		
Note: If the date inserted in this b	st be specific and cannot be prior to date of lock does not meet the applicable statu	filing or more than 90 days utory filing requirements.	after filing.) Pu . this date wil	rsuant to 6 l not be li	05.020 sted a
document's effective date on the E	Department of State's records.				
he record specifies a delayed effection	ve date, but not an effective time, at 12	2:01 a.m. on the earlier o	f: (b) The 9	Oth day af	ter th
ord is filed.					
Dated JULY 7	2022				
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711 A	V / V - M - 1 /				
ou	Signarure of a member of authorized rep	oresentative of a member			