

122 000 222804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

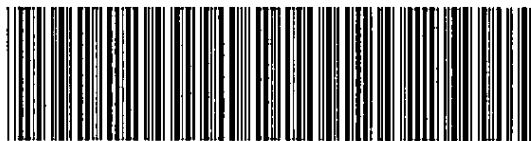
(Business Entity Name)

(Document Number)

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2022 JUN -7 AM 10:33

FILED

8/20/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lillypad Landscape LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa Nokielski
Name of Person

Lillypad Landscape LLC
Firm/Company

2135 Sherbrook Ave
Address

Davenport FL 33837
City/State and Zip Code

Melissa@lillypadlandscape.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Nokielski at (586) 612-0331
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$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)

Mailing Address:

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

Street Address:

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

Lillypad landscape LLC

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

FILED
2022 JUN -7 AM 10:33

The Articles of Organization for this Limited Liability Company were filed on May 11, 2022 and assigned
Florida document number L22000222804

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here: (Same)

Lillypad landscape LLC

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 applicable:

(Principal office address MUST BE A STREET ADDRESS)

2135 Sherbrook Ave
Davenport, Florida
33837

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2135 Sherbrook Ave
Davenport FL 33837

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Melissa May Nowicki

New Registered Office Address:

2135 Sherbrook Ave

Enter Florida street address

Davenport
City

Florida

33837
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.

Melissa May Nowicki

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> | <u>Type of Action</u> |
|--------------|-------------|----------------|-----------------------|
|--------------|-------------|----------------|-----------------------|

| | | | |
|-----|-----------------|--------------------|--|
| MGR | David Nokielski | 2135 Sherbrook Ave | <input type="checkbox"/> Add |
| | | Davenport FL 33837 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

| | | | |
|-----|-------------------|---------------------|---|
| MGR | Melissa Nokielski | 2135 Sherbrook Ave | <input checked="" type="checkbox"/> Add |
| | | Davenport, FL 33837 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Removing David Nokielski

+ Adding Melissa Nokielski

FEI #88-2257184

E. Effective date, if other than the date of filing: June 1st, 2022 (optional)

(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated

June 1

2022



Melissa May Nokielski

Signature of a member or authorized representative of a member

Melissa May Nokielski

Typed or printed name of signee

David Nokielski