L22000251007

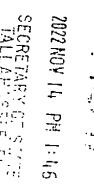
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Registration Section

TO:

	Registration Se Division of Cor		· • ·		3.
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SUBJEC	Lawof the		** *:	<u></u>	
		Name of Lim	ited Liability Company		
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		Haley M. Bethel			
			Name of Person		
			Firm/Company		
		4789 SE Anchorage Drive			
			Address		
		Stuart34997			20 S
City/State and Zip Code					
		E-mail address: (to be used for future annual report not	tification)	2022 NOV 114 SECRETARY
For furth	er information c	oncerning this matter, please c	all:		167. P
Haley M	l. Bethel		772 631-4774		<u> </u>
	Name o	f Person	Area Code Daytir	ne Telephone Number	, i, o
Enclosed	l is a check for th	he following amount:			
■ \$2 5.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
	Mailing Addres		Street Address:		
Registration Section Division of Corporations			Registration Se Division of Co		
	P.O. Box 632		The Centre of	Tallahassee	
	Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 8	10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Law of the Lawn, LLC	
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company vi Florida document number L22000251007	vere filed on 06/01/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and the words "Limited Liability".	y Company," the designation "Ll.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	TO LET TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO T
Enter new mailing address, if applicable:	P T
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	idress on our records, enter the name of the new regist
	Enter Florida street address
	Florida
N. B. i.e. M. C. and C.	City Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is

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 bein or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Act
MGR	Haley M. Bethel	4789 SE Anchorage Drive	[]Add
		Stuart, Florida 34997	■Remove
			□Change
			□ Add
			□Remove
			Change
			Remove Re
			PP Add Remove
			□Add
			□Remove
			Change
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Effective date, if of	her than the date	of filing:			_ (optional)		-
Effective date, if ot fan effective date is list Note: If the date insedocument's effective	erted in this block d	loes not meet the	applicable statute	ling or more than 90 d ory filing requireme	ays after filing.) P ents, this dat é wi	ursumt te ill not be	o 605.02 : listed
e record specifies a de rd is filed.	elayed effective date	e, but not an effe	ctive time, at 12:0	01 a.m. on the earlie	er of: (b) The S	90th day	after th
Dated	16/2022		··				
Dated	blei /	7. Beti	2	sentative of a member			_
	Sign	ature of a member	or authorized repre	sentative of a member	r		
	. /						

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