122000253929

(Requestor's Name)	
(Address)	
,,	
(Address)	
(City/State/Zip/Phone #)	
(=1), =1000 = 1,	
T BICKLIB T MAIL	
FICK-OF WAIT MAIL	
(Business Entity Name)	
(=====================================	
(Document Number)	
Certified Copies Certificates of Status	
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
Special Instructions to Filing Officer:	
LIMAIC	

Office Use Only



600424614796

02/20/24 --0:0:2---0:7 ••25.00

COVER LETTER

	tration Section of Corp		1	
	MORALES	LANDSCAPING SERVICES	S, LLC	,
SUBJECT: _		Name of Lim	ited Liability Company	
The enclosed A	Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return a	ll correspo	ndence concerning this matter	to the following:	
		LUIS F MORALES		
		·	Name of Person	
		MORALES LANDSCAPI	NG SERVICES, LLC	
			Firm/Company	
		16040 STALLION DR. E		
		······································	Address	
		LOXAHATCHEE, FL 334	470	
			City/State and Zip Code	
		MLPROFESSIONALSOLU	<u>-</u>	
		E-mail address: (to be used for future annual report notif	ication)
For further info	ormation co	oncerning this matter, please c	all:	
LUIS F MOR	ALES		561 6036630 at ()	
	Name of	f Person		: Telephone Number
Enclosed is a c	check for th	ne following amount:		
■ \$25.00 Fil	ing 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)
	ng Addres stration S		Street Address: Registration Sec	ction
-		orporations	Division of Cor	
	Box 632		The Centre of T	
Talla	ahassee. F	FL 32314	2415 N. Молгос	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Com</u> (A Florida Limite	i <mark>pany as it now appears on our record</mark> ad Liability Company)	<u> </u>			
The Articles of Organization for this Limited Liability Compared Florida document number 122000253929	ny were filed on <u>06/02/2022</u>	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited li	ahility company here:				
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC	C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	16040 STALLION DR. E				
(Principal office address MUST BE A STREET ADDRESS)	LOXAHATCHEE, FL 33470	· · · · · · · · · · · · · · · · · · ·			
		: -			
		(N)			
Enter new mailing address, if applicable:	16040 STALLION DR. E				
(Mailing address MAY BE A POST OFFICE BOX)	LOXAHATCHEE, FL 33470				
		· 5			
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, <u>enter</u>	r the name of the new reg			
New Registered Office Address: 16040 STAI	LLION DR. E				
	Enter Florida street address				
LOXAHAT		lorida <u>33470</u>			

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
AMBR	LUIS F MORALES	16040 STALLION DR. E	□Add
		LOXAHATCHEE, FL 33470	□Remove
			■Change
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		 	□ Change
			□Remove
			□Change
			□Add
			□Remove
			□ ("hange

_												
											-	
_											<u>-</u>	
_			_ .									
												
_	<u></u>	 .							<u> </u>			
_												
								_				
_			· · ·								.	
_												
									•			
_		<u> </u>	_								_	
 -											_	·
												
_												
fectiv	e date, if ot	her than t	he date o	f filing	g:				(ptional	l)	
an effec	tive date is list f the date ins	ted, the date i	must be spe	erfic and	l cannot be	prior to da	ite of filing	g or more th	ian 90 days	after filin	g.) Pursuan	t to 605,0207
	nt's effective						Milatory	, mile red	an ement	. 111.5 (10)	e will not	oe naed us
	specifies a d	elayed effec	tive date,	but not	an effect	ive time,	at 12:01	a.m. on th	e carlier o	f: (b) T	he 90th d	ay after the
is filed	d.											
, F	EBRUARY	21			2024							
ated	EBRUARY					·						
		luis	F	Mu	rale	٠,						
	-		Signatu	re of a r	nember or	authorize	d represer	ntative of a	member			