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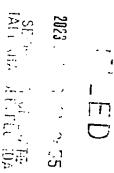
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COVER LETTER

| TO: Registration S Division of Co | | | | | |
|---|---|---|---|--|---|
| | ures Lawn Care No. 4 | | | | |
| SUBJECT: | Name of Lin | nited Liability Company | | _ | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | |
| Please return all correspo | ondence concerning this matter | to the following: | | | |
| | Gary Henriksen | | | | |
| | | Name of Person | | | |
| | Ironclad Tax Accounting, | LLC | | | |
| | | Firm/Company | | | |
| | 328 Emmalee Place | | | | |
| | - | Address | | | |
| | The Villages FL 32162 | | | 2023 SE17 | |
| | | City/State and Zip Code | · · · · · · · · · · · · · · · · · · · | - <u>\$</u> | • |
| | ironfinl@comeast.net | | | <u> </u> | |
| For further information c | E-mail address: (concerning this matter, please c | to be used for future annual restable: | port notification) | - <u> </u> | T |
| Gary Henriksen | | 352 350- at () | 1733 | 9 | |
| Name o | of Person | Area Code | Daytime Telephone Num | nber | |
| Enclosed is a check for t | he following amount: | | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certif ed) Certif | D Filing Fee, ficate of Status & fied Copy onal copy is enclosed) | |
| <u>Mailing Addres</u> Registration (| • | <u>Street Add</u> Registrati | <u>ress:</u> ion Section | | |
| Division of Corporations | | Division | of Corporations | | |
| P.O. Box 632 Tallahassee, 1 | | | re of Tallahassee Monroe Street, Suite | 810 م | |
| Turiana.ce, | L L. J. J. I. T | 271011.1 | arance onect, our | CHIO | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Lim | ited Liability Company as it now a (A Florida Limited Liability Comp | ppears on our records.) any) | | |
|---|---|---|-------------|--|
| the Articles of Organization for this Limited Liability Company were filed on 6-7-2022 lorida document number 1.22000260507 | | | | |
| This amendment is submitted to amend the fol | | | | |
| A. If amending name, enter the new name | of the limited liability compa | ny here: | | |
| he new name must be distinguishable and contain the | words "Limited Liability Company." | the designation "LLC" or the abbreviatio | n "L.L.C." | |
| Enter new principal offices address, if appli | cable: | SE: | 1 | |
| Principal office address MUST BE A STRE | ET ADDRESS) | | | |
| | | <u> </u> | 1 | |
| | | phony in | ı | |
| Inter new mailing address, if applicable: | | <u></u> | | |
| Mailing address MAY BE A POST OFFICE BOX) | | | | |
| | | <u> </u> | | |
| 3. If amending the registered agent and/or gent and/or the new registered office addr | | our records, <u>enter the name of the</u> | new regi | |
| Name of New Registered Agent: | David Sims Jr. | | | |
| New Registered Office Address: | 17226 SE 96th Avenue | | | |
| | Ente | r Florida street address | | |
| | Summerfield | Florida 34491 | | |
| | City | Zip C | nte | |

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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

. MGR = Manager AMBR = Authorized Member

| Title | <u>Name</u> | Address | Type of Action |
|-------|----------------|-----------------------|----------------|
| MGR | Daeshawn Sims | 17226 SE 96th Avenue | □Add |
| | | Summerfield, FL 34491 | ≣Remove |
| | | | 🗆 Change |
| MGR | David Sims Jr. | 17226 SE 96th Avenue | = Add |
| | | Summerfield, FL 34491 | □Remove |
| | | | □Change |
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1 7 2 1 D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) None E. Effective date, if other than the date of filing: (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.

F. Effective date, if other than the date of filing:

(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.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 department of State is record is filed.

Dated

Dated

Dated

Daeshawn Sims

Typed or printed name of signee