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| Certified Copies           | Certificates     | of Status |
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| Special Instructions to Fi | iling Officer.   |           |
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## COVER LETTER

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|---------------------------------------|--|----------------------------------|--|--|---|
| SUBJECT:                              | CARLOS LANDSCAPING COMPANY & MORE LLC  |                                  |  |  |   |
| Schutter.                             | -  |                                  |  |  |   |
| The enclose                           | d Articles of .  | Amendment and fee(s) are sub     | muted for filing.  |  |   |
| Please returi                         | a all correspo   | ndence concerning this matter    | to the following:  |  |   |
|                                       |  | CARLOS HERNANDEZ-                | LUGO   |  |   |
|                                       |  |                                  | Name of Person   |  | -                                       |
| CARLOS LANDSCAPING COMPANY & MORE LLC |  |                                  |  |  |   |
|                                       |  |                                  | Fum/Company  |  | -<br>!•. <b>J</b>                       |
|                                       |  | 2314 15TH AVE E                  |  |  | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |
|                                       |  |                                  | Address  |  |   |
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|                                       |  |                                  | City/State and Zip Code  | ·  | PM 3: 13<br>OF STATE<br>SEE, FL         |
|                                       |  | basant@ashuinsurance.com         | to be used for future annual report not  | ification)                                     | 51A 3                                   |
| For further i                         | nformation c   | oncerning this matter, please of | •  |  | ' ₩ ω                                   |
|                                       | HERNANDES  | -                                | 941 580-4805   |  |   |
| Name of Person                        |  | Area Code Daytir                 | ne Telephone Numbe   | er   |   |
| Enclosed is                           | a check for th   | ne following amount:             |  |  |   |
| <b>■</b> \$25,00                      | ■ \$25,00 Filing Fee Search Status   |                                  | (additional copy is enclosed) Cettific   |  | ate of Status &                         |
| Ro<br>Di<br>P.0                       | niling Addressing Stration Stration of C<br>Vision of C<br>O. Box 632<br>Hahassee, 1 | section<br>orporations<br>7      | Street Address:<br>Registration So<br>Division of Co<br>The Centre of<br>2415 N. Monro<br>Tallahassee, F | rporations<br>Tallahassee<br>oe Street, Suite≥ | 810                                     |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CARLOS LANDSCAPING COMPANY & MORE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{106/22/2022}{1}$ and assigned Florida document number 1.22000283415 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: New Vision Landscaping & Tree Service LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address . Florida

## 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.

Cirv

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

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| Flective date, if other than the are effective date is listed, the date in force: If the date inserted in this ocument's effective date on the | ust be specific and car<br>block does not mee | anot be prior to<br>t the applicab | date of filing or i<br>de statutory fili | nore than 90 days   | optional)<br>after filing ) Pursu<br>, this date will no | ant to 605 03<br>of be listed |
| record specifies a delayed effect is filed.  | uve date, but not an                          | effective tim                      | e, at 12 01 a m                          | on the eather c     | of; (b) The 90th   | day after tl                  |
| ated   | ·   | 2024                               |  |                     |  |                               |
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Filing Fee: \$25.00