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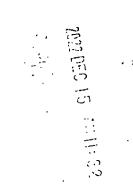
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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:	press Creek Tree	e Service LIL		
- Ogf	Name of Limi	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Joseph L	1 Esgro		
	`	Name of Person		1672 BEG 15
		Firm/Company	·	3 5
	12185 Phoeni	x Ove		35 111.32
	weeki Wach	ee F2 34614 City/State and Zip Code		(၁ (၁
		city state and 21p code ces 2021 @ amoud . C to be used for future angual report notif	UM fication)	
For further information c	oncerning this matter, please ca	all:		
Joseph H Name o	(SOM):	at (<u>A</u> V1) <u>A</u> VV (Area Code Daytim	3200 e Telephone Number	_
Englosed is a check for the	ne 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 Addres		<u>Street Address:</u> Registration Sec	ction	
Registration Section Division of Corporations		Registration Sec Division of Cor		
P.O. Box 6327		The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cypress Creek Tree	Service LLC	woords)
(A Florida L	Company as it now appears on our comitted Liability Company)	ecorus.)
The Articles of Organization for this Limited Liability Co. Florida document number <u>LJAOOOJ89109</u>	mpany were filed on 00 27	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		F-3
(Principal office address MUST BE A STREET ADDRE	<u></u>	
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		32
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, g	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
<u> </u>		, Florida
	City	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.

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>	Name	Address	Type of Action
<u> MGR</u>	Joseph H Esgro	12185 Phoenix ave	Add
	U	Weeki Wachee FL 34614	□Remove
			□ Change
			□ Add
			Ghange .
			UAddy
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

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

Signature of a member or authorized representative of a member