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Office Use Only



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RECEIVED

## Incorporating Services, Ltd.

**incserv**<sup>D</sup>

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

#### **ORDER FORM**

TO Florida Department of State

FROM

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810

850.656.7953

Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

**REQUEST DATE** 6/13/2023

PRIORITY F

Regular Approval

OUR REF # (Order ID#) 1154744

ORDER ENTITY

RIOS LANDSCAPING SOLUTIONS LLC

# PLEASE PERFORM THE FOLLOWING SERVICES:

RIOS LANDSCAPING SOLUTIONS LLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

### RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956.

Sincerely.

Please bill us for your services and be sure to include our reference number on the invoice and couner package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, June 13, 2023 Page 1 of I

## ζ,

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### RIOS LANDSCAPING SOLUTIONS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(λ Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on June 29th, 2022	and assigned
Florida document number L22000293975		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
MONTECITO LANDSCAPE & LAWN CARE LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	he abbreviation "L.L.C."
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 agent and/or the new registered office address here:	address on our records, <u>enter the i</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
<del></del>	, Florida	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>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
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Signature of a member or authorized representative of a member	is filed.	2023	·		
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