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COVER LETTER

TO:

Registration Section

Division of Cor	porations				
eudie <i>e</i> t.	LAWNS O	F LIFE LLC			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Sonia Becerra			
Name of Person					
		Swyft Filings			
Firm/Company			_		
		3 Greenway Plaza #1320		<u>S</u>	20
		Address			22
		Houston, TX 77046		m	2022 NOV 2
		City/State and Zip Code		- :	_
		nurphy1998@yahoo.com		47	==
	E-mail address: (to be used for future annual report not	ification)	715	PH 1: 3
For further information of	oncerning this matter, please co	all:		121	<u></u>
Sonia B	ecerra	at (<u>877</u>)	0450		
Name o	f Person	Area Code Daytin	ne Telephone Numb	er	
Enclosed is a check for t	he following amount:				
S \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	Filing Fee, cate of State ed Copy ad copy is end	
Mailing Address		<u>Street Address:</u> Registration Se	ection		
Registration Section Division of Corporations		Division of Co			
P.O. Box 632	27	The Centre of	Tallahassee		
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite	810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAWNS OF LIFE LLC

(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our record Liability Company)	(5.)	
The Articles of Organization for this Limited Liability Company Florida document numberL22000343768	were filed on08/04/20	22 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	5670 SE 35th Street		
(Principal office address MUST BE A STREET ADDRESS)	Ocala, FL 34480	2022 SEC FA	
		HOV 2	
Inter new mailing address, if applicable:	<u></u>		
Mailing address MAY BE A POST OFFICE BOX)		The second secon	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter	the name of the new register	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address	5	
	, 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
			□Add
			□Remove
			□ Change
			□Remove
			TAC Denange
			□ Mdd □ Remove □ □ Change
			ω Ghange
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	_		'' ''''''''''''''''''''''''''''''''''
		1: =4	
fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date ote: If the date inserted in this block does not meet the applicable so comment's effective date on the Department of State's records.	e of filing or more than 90 tatutory filing requiren	(optional) days after filing.) Purs	suant to 605.020 not be listed a
ecord specifies a delayed effective date, but not an effective time, at is filed.	: 12:01 a.m. on the earl	lier of: (b) The 90t	th day after the
ted 10/26 2022			
,			
X Signature of a member or authorized of Murphy Typed or printed name			

Filing Fee: \$25.00