L23000006914

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COVER LETTER

TO: Registration Section

Division of Cor	porations					
	Lawn Care LLC					
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·			
····	A 1 1 . 6 / .)	min of the Olive				
The enclosed Afficies of	Amendment and fee(s) are sub	nutted for thing.				
Please return all correspo	indence concerning this matter	to the following:				
	Matthew S McMahan					
Name of Person				-		
	McMahan Lawn Care LLC					
		Firm/Company		_		
	15126 88th Place North					
		Address		_		
	Loxabatchee, Fl 33470			SF.	2023	
		City/State and Zip Code	•	_ - -	-	-
	mcmahanlawncarellc@gma		I*		1	
For further information c	n-mail address: (oncerning this matter, please c	to be used for future annual report not all:	neation)			!
Matthew McMahan		561 212-6272		(. 10%	L ,	_
Name o	f Person		e Telephone Numbe	er .	-	
Enclosed is a check for th	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 F Certific Certific (addition)	ate of St d Copy	atus &	
Mailing Addres		<u>Street Address:</u> Registration Se	ction			
Registration S Division of C		Registration Se Division of Co				
P.O. Box 632	.7	The Centre of T	Γallahassee			
Tallahassee. l	FL 32314	2415 N. Monro	e Street, Suite	810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MCMAHAN LAWN CARE LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our r nited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Comp	pany were filed on January 3, 20	023 and assigned
lorida document number L23000006914		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES.	<u> </u>	
		<u> </u>
Enter new mailing address, if applicable:		G. S.
Mailing address MAY BE A POST OFFICE BOX)		
	······································	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>c</u>	nter the name of the new registo
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street e	address
	City	_, 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 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_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Matthew S McMahan	15126 88th PLN Loxabatchee, FL 33470	#Add
			□Remove
			□Change
			🖾 Add
			□Remove
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ffective date, if other than the data an effective date is listed, the date must be	ate of filing:e e specific and cannot be pri	or to date of filing or m	ore than 90 days after	onat) r filing.) Pursuant	ю 605.0207
Note: If the date inserted in this block	k does not meet the appl	icable statutory filing	g requirements, thi	s date will not b	oe listed as
locument's effective date on the Depa	iriment of State's record	18.			
the state of the state of the state of	lan language	4ino nt 17:01 n m	on the condition of the	a. The Ooth do	n attactha
record specifies a delayed effective d d is filed.	ane, but not an effective	time, at 12.01 a.m. (on the earner or. (c)) The 30m da	y after the
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January 13 Pated	2023				* ~
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Sip	gnature of a member or au	thorized representative	of a member	. ار	1
Matthew S McMahan				•	しフ

Typed or printed name of signee