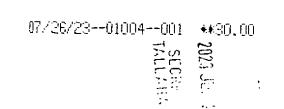
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COVER LETTER

TO: Registratio Division of	n Section Corporations				
/	KMT LANDERMAN 1	. 			
SUBJECT:	ISMT Landscaping L	ed Liability Company			
	·				
The enclosed Article	s of Amendment and fee(s) are subm	itted for filing.			
Please return all corr	espondence concerning this matter to	the following:			
	70SC	S Martinez Thruc	<u> </u>		
		Name of Person	····		
		Firm/Company			
	On so	. 1 No ess Balada			
	<u> </u>	nê DR NW Apt A Address			
	Ta de 1100	n			
	- Las lant	M Buch & 3K4K City/State and Zip Code 1ûMSCuping D Gruid be used for future amjual report notif			
	T(M+.	Variation D (Main	1.ian		
	E-mail address: (to	be used for future arrival report notif	ication)		
For further informati	on concerning this matter, please call	l :			
10(c C U/s	Sile and Shiki is	(เก	< 0.1a		
103C 2 MO	me of Person	at (<u>SSV</u>) <u>543 · 1</u> Area Code Daytime	: Telephone Number		
Enclosed is a check t	for the following amount:				
□ \$25.00 Filing Fe		☐ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,		
325.00 Tillig Te	Certificate of Status	Certified Copy	Certificate of Status &		
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)		
		a			
Mailing Address: Registration Section		Street Address: Registration Section			
_	of Corporations	Division of Cor			
P.O. Box	-	The Centre of T			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TOUR LANGE	illoing LLC	SOSI	JUL 20 11
(Name of the Limited Liability (A Florida L	Company as it now appear imited Liability Company)	r <u>s on our records.</u>) SEI TAL	Chilip
The Articles of Organization for this Limited Liability Cor Florida document number <u>レス300047189</u>		0/02/-2	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company he	ere:	
The new name must be distinguishable and contain the words "Limite Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRE		esignation "LLC" or the	abbreviation "L.L.C."
Enter new mailing address, if applicable: (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:	office address on our r	ecords, <u>enter the na</u>	ame of the new registo
Name of New Registered Agent:			
New Registered Office Address:	Enter Floi	rida street address	·
		, 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 Changing Registered Agent, Signature of New Registered Agent

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

Title	Name	Address	Type of Action
MGR	Jose S Martinez	20 cape DR. Niv Apt A ab32548 FL	(L' Add
	Fortwalton Be	ab32548 FL	□Remove
		<u></u>	Change
			DAdd
			□Remove
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lan effecti <mark>Note:</mark> If i	ve date is listed, the date inserte	r than the date the date must be sed in this block on the on the Depart	specific and ca does not mee	innot be prior to et the applical	date of filing or	more than 90 da	(optional) ys after filing.) Po its, this date wi	ursuant to 605.0207 Il not be listed as
record s d is filed		yed effective dat	e, but not an	i effective tin	ne, at 12:01 a.m	i, on the earlier	r of: (b) The 9	0th day after the
Dated	7-6	76	·	2023				
		,	\ (_/ //				
		Sign	ature of a me	mber or author	rized representati	ve of a member		

Filing Fee: \$25.00