L23000149370

(Re	equestor's Name)	-
(Ac	ddress)	-
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Date: 5/30/2023

Florida Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: HAMER PROFESSIONAL SOLUTIONS LLC - File Number: L23000149370

To Whom It May Concern:

Attached please find the executed {Document being filed} the above referenced. Please review and file the attached document on a routine basis.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc. Attention: Nicholas Bialota 336 E. College Ave. Suite 301 Tallahassee, FL 32301

If you have any questions, please feel free to contact me at 844-493-6249 or at {fulfillment@zenbusiness.co or compliance@zenbusiness.com}.

Thank you,

Nicholas Bialota ZenBusiness Customer Success

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAMER PROFESSIONAL SOLUTIONS LLC		
(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000149370</u>	were filed on <u>03/24/2023</u>	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:	
High-Caliber Lawn Maintenance LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter your principal offices address if applicables		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	·	<u>S</u>
		<u> </u>
		120 120
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u>i</u>
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		27
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 t</u> l	he name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
new Registered Office Induces.	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	e performance of my duties, and provided for in Chapter 605, F	l I am familiar with and S. Or, if this document is

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
			Change
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ffective date, if other than the an effective date is listed, the date mu lote: If the date inserted in this b ocument's effective date on the D	e date of filing: ust be specific and cannot be prior to de block does not meet the applicable Department of State's records.	ate of filing or more than 90 days statutory filing requirements	optional) after filing.) Pursuant to s s, this date will not be	605.0 listed
record specifies a delayed effecti l is filed.	ve date, but not an effective time,	at 12:01 a.m. on the earlier of	of: (b) The 90th day a	fter t
Jun 14th ated				
/s/ Robert Hamer	Signature of a member or authorize			