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COVER LETTER

Division of Corporations VASQUEZ LAWN SERVICE & LANDSCAPING LLC SUBJECT: ____ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Mark A. Vasquez Name of Person Firm/Company 420 24th Ave East Address Bradenton, Florida 34208 City/State and Zip Code mendoza2074@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Haidee Mendoza 941 4059114 Name of Person Daytime Telephone Number Area Code Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & \$25.00 Filing Fee ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VASQUEZ LAWN SERVICE & LANDSC	APING LLC	
(Name of the Limited Liabi (A Florid	lity Company as it now appears on da Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lin</u>	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	-
		•
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		ds, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	
	isnier i iorida si	reei aaaress
	City	, Florida Zip Code
	Cuy	гір Соце

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MARK A. VASQUEZ	420 24TH AVE EAST BRADENTON, FL 34208	= Add
			□Remove
			□Change
			Петюче
			Change
			□ Add
			□Remove
			□Change
			🗆 Add
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				· -
Effective date, if other than the da (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	does not meet the appl	icable statutory filing req	(optional) an 90 days after filing.) Pur uirements, this date will	rsuant to 605,0207 (3 I not be listed as th
ne record specifies a delayed effective da ord is filed.	nte, but not an effective	time, at 12:01 a.m. on the	e earlier of: (b) The 90	th day after the
NOVEMBER 29TH	2023	<u></u> .		
Dated				
		horized representative of a r	nember	

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