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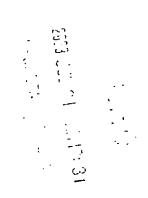
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
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(Business Entity Name)			
(Document Number)			
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A. RIVERS AUG 2 7 2023

COVER LETTER

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:	
	Anjannette A Barrineau		
		Name of Person	
	Lush Landsca pe Maintena	nce & Design, LLC	
Firm/Company			
	9176 N Golfviiew Dr		
		Address	
	Citrus Springs, FL 34434		
		City/State and Zip Code	
	aab1977@aol.com		N
	E-mail address: (to be used for future annual report notif	lication)
For further information of	concerning this matter, please ca	ılı:	
Anjannette A Barrineau		રહ.()	
Name of Person		Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of States	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of States & Certified Copy (additional copy is enclosed)
Mailing Addre	<u>ss:</u>	Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

Division of Corporations

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

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 06/26/2023 Florida document number 1.2300028319:9	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new mame of the limited liability company here:	
The new name must be distinguishable and cont ain the words "Limited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent amd/or registered office address on our records, enter the agent and/or the new registered office address here:	e name of the new register
Name of New Registered Agents.	
New Registered Office Address: Enter Florido street address:	
Amter Asteriale street autoreer	$\mathcal{L} \subseteq \mathcal{L}$
Flori	da

New Registered Agent's Signature, if changing Registered Agent:

Luch Landceane Maintenance & Decion, ELC

Thereby 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
AMBR	Anjannette A Barrineau	9176 N Golfview Dr. Citrus Springs, FL 34434	[]/\dd
			□Remove
		···	Change
AMBR	Scott A Barrineau	9176 N Golfview Dr, Citrus Springs, FL 34434	= Add
			□Remove
			© Add
			DRemove
			□Change
		_	□Add
			□Remove
			□Change
		_	□Add
			□Remove
		 	□Change
			□ Add
			□Remove
			□Change

	
	
	
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<u> </u>	
Effective date, if other than t	the datte of filing: (optional)
(If an effective date is listed, the date r	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
he record specifies a delayed effec	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ord is filed.	
Dated July 18	2023
//	
_///	Signature of a member or authorized representative of a member
	Enganature of a member of authorized representative of a member
Anjannette A Barrin	eau
	Typed or printed name of signee

COVER LETTER

Registration Section Division of Corporations

TO:

Lush Lands	scape Maintenance & Design, I	LC			
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:			
	Anjannette A Barrineau				
	-	Name of Person			
	Lush Landsca pe Maintena	nce & Design, LLC			
	· · · · · · · · · · · · · · · · · · ·	Firm/Company			
	9176 N Golfview Dr				
	Address				
	Citrus Springs, FL 34434				
		City/State and Zip Code	· · · · · · ·		
	aab1977@aol.com				
	E-mail address: (to be used for future annual report not	fication)		
For further information c	concerning this matter, please c	aff:			
Anjannette A Barrineau		561 248-3493 स.(}_			
Name of Person			ne Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Se Division of Cor The Centre of 2415 N. Monro Tallahassee, FI	rporations Fallahassee be Street, Suite 810		