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Registration Section

Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

COVER LETTER

Division of Corporations B&C Landscape Solutions 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: Boaz Routte Name of Person **B&C** Landscape Solutions LLC Firm/Company 1960 Taylor Road Address Port Orange, FL 32128 City/State and Zip Code BandCsolutionsllc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 846-9493 **Boaz Routte** Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee & ₩ \$60.00 Filing Fee. ☐ \$25.00 Filing Fee **≡** \$30,00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

npany as it now appears on our recorded to Liability Company)	<u>s.</u>)
my were filed on 6/14/2023	and assigned
ability company here:	
ability Company," the designation "LLC"	or the abbreviation "L.L.C."
ce address on our records, <u>enter</u>	the name of the new regist
Enter Florida street address	
, Flo	orida Zip Code
	ability company here: ability Company," the designation "LLC" be address on our records, enter Enter Florida street address Flo

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 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	Boaz Routte	1960 Taylor Road	= Add
		Port Orange, FL 32128	□Remove
			□Change
MGR Carrine Routte	Carrine Routte	1960 Taylor Road	
		Port Orange, FL 32128	□ Remove
			□Change
SEC Rene Routte	Rene Routte	1960 Taylor Road	■Add
		Port Orange, FL 32128	□Remove
			□Change
			□Remove
			Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
			□Change
			
			Remove
			□Change

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effec <u>Note:</u> If	e date, if other than the date of filing:
record is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	2/5/2024
	2/5/204 Boax Flowtte Boaz Routte
	Signature of a member of authorized representative of a member
	Boaz Routte

Typed or printed name of signee