L23000300481

	(Requestor's Name)	
	(requestors reality)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Business Entity Name)	
	(Document Number)	
Certified Copies	_ Certificates of	Status
Cassial lastrustians to	Cilina Officer:	. "
Special Instructions to	Filing Officer.	
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Office Use Only



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2023 AUG -2 PH 4:4

SERVICES, INC
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s account: 120210000160: \$35:00 25.00
Jan Hull
JL23000300487
DOCUMENT #
<u>AMMENDMENTS</u>
_X_Amendment
Resignation of R.A. Officer/Director Change of Registered Agent
Revocation of Dissolution
Merger
Articles of Conversion Amended and restated Articles
Statement of Authority
REGISTERATION/QUALIFICATIONS
Foreign filing
Qualification for LLP Reinstatement
Other

COVER LETTER

Division of Corp			
Bonita Lawi	n Core, ELC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are subi	nitted for filing.	
	ndence concerning this matter		
	Manuela Ignacio Antonio		
		Name of Person	 +
	Bonita Lawn Care, LLC		
		Firm Company	
	26713 Coventry Ln		
		Address	- · · · · · · · · · · · · · · · · · · ·
	Bonita Springs, FL 34135		
		City/State and Zip Code	
	bonitalawneare23(a/gmail.ec	om to be used for future annual report no	tilication)
For further information c	oncerning this matter, please ca		
Manuela Ignacio Antonio	,	99عا 366	C ⁱ
Name o	l'Person	Area Code Daytii	me Telephone Number
Enclosed is a check for th	ic following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filmg Fee. Certificate of Status & Certified Copy (additional copy is encosed)
<u>Mailing Addres</u> Registration S		<u>Street Address;</u> Registration S	
Division of C	Corporations	Division of Co	orporations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



August 3, 2023

FLORIDA CAPITAL COURIER SERVIÇES

SUBJECT: BONITA LAWN CARE, LLC

Ref. Number: L23000300487

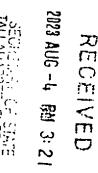
We have received your document for BONITA LAWN CARE, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 623A00017513



TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Bonita Lawn Care, LLC

2023-AUG--4-AM 8: 42

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company) TALLAHASSEE FLORID The Articles of Organization for this Limited Liability Company were filed on $\frac{06/22/2023}{1}$ Florida document number 1,23000300487 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NAThe new pame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address

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 tiled 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.

City

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being addefor removed from our records:

MGR = \ Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Ignacio Ignacio Antonio	26713 Coventry Ln	Add
		Bonita Springs. FL 34135	
AMBR	Manuela Ignacio Antonio	26713 Coventry Ln	
		Bonita Springs, FL 34135	
			Change
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tive date, if other than th ffective date is listed, the date in	e date of filing: ast be specific and cannot be prior to date of filing or	more than 90 days after filing 1 Pursuant to 605.02
\underline{z} If the date inserted in this t	block does not meet the applicable statutory fili Department of State's records.	ing requirements, this date will not be listed
ord specifies a delayed effecti	ve date, but not an effective time, at 12:01 a.m.	i, on the earlier of: (b) The 90th day after t
filed.		
Anoust 4	2023	
1	1	
11.16	2023 Signature of a member or authorized representative	
11/1/1/11/11/11		
MAR	Signature of a member or authorized representation	ve of a member