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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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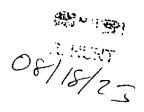




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DIVISION OF CERTORIES INC.



COVER LETTER

TO:	Registration S Division of Co			् । अ.	•
SUBJE		Homes Lawn Care and Repairs I	LLCC		
The en	closed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please	return all corresp				
		Travis Sherlock			
			Name of Person		
		Sherlock Homes Lawn Car	re and Repairs LLC		
Firm/Company					
5112 Ile De France Drive					DIVISION OF 2023 AUG 1
			Address		AUG AUG
		Tailahassec, FL 32308			
City/State and Zip Code					
sherlockhomeslawncareandrepair@gmail.com					CORPORATION
		E-mail address: (to be used for future annual report not	fication)	- 10
For fur	ther information	concerning this matter, please concerning	ali:		
Travis	Sherlock		720 219-2222 at ()		
	Name	of Person	Area Code Daytin	ne Telephone Number	
Enclose	ed is a check for	the following amount:			
■ \$2.	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclo	
	Mailing Addre	ree.	Street Address		

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

Street Address:
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

Sherlock Homes Lawn Care and Repairs LLC (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 $\frac{7-27-23}{1}$ __ and assigned Florida document number ______L23000354450 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Sherlock Homes Lawn Care and Repair LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 5112 Ile De France Drive Enter new principal offices address, if applicable: Tallahassee, FL 32308 (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 and/or registered office address on our records, enter the name of the new registered

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

agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street uddress

, Florida

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	Travis Sherlock	5112 Ile De France Drive	<u>⊟</u> Add
		Tallahassee, FL 32308	□Remove
AMBR	Sarah Sherlock	5112 Ile De France Drive	□Add
		5112 Ile De France Drive	□Remove
			■Change
			□Add
			□Remove
			□Change
			JUNISTON OF THE PROPERTY OF TH
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. Effective date, if other the (If an effective date is listed, the Note: If the date inserted it document's effective date of	date must be sp n this block do	ecific and cann oes not meet t	the applicable		ore than 90 days			
the record specifies a delayed cord is filed.	effective date	, but not an e	ffective time,	at 12:01 a.m.	on the earlier o	f: (b) The 90th d	ay after the	
Dated 8 16	Signa		DQ3	d representative	of a member			
	ravis	Shor	tor k	nme of signee				

Filing Fee: \$25.00