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(Re	questor's Name)	_
(Ad	dress)	
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(, ,2	u. 000,	
(Cit	y/State/Zip/Phoni	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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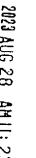
Office Use Only



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SECRETARY OF THE TALLAHASSEE, FLORIDA





COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:4	ETC	· laun care	Socion 110	
50barci: <u>z</u>	<u>, / (</u>	Name of Limi	Service 11C ited Liability Company	
The enclosed Artic	cles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all co	orrespon	dence concerning this matter	to the following:	
		n	_	
		A,	na M Raya	
			THE COLUMN	
			Firm/Company	
		1		
		3008 Hc	Address	
		'LaBelle	F-1. 33935 City/State and Zip Code	
			4440 hotmail. Co	
		E-mail address (t	to be used for future annual report noti	fication)
For further inform	ation cor	ncerning this matter, please co	all:	
Ana	H	Raya	at (<u>863</u>) <u>134-8</u> Area Code Daytim	855
}	Name of I	erson	Area Code Daytim	e Telephone Number
		following amount:		
\$25.00 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 enclosed)
Mailing /	Address:	ı	Street Address:	
Registra	ution Sc	ection	Registration Sec	
Divisioi P.O. Bo		rporations	Division of Cor The Centre of T	·
Tallahas				e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GTO Lawn Care Se	ervice.	LLC			
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appe bility Company	ars on our records.)			
The Articles of Organization for this Limited Liability Company w	ere filed on _	08/18/202	}	and ass	signed
Florida document number 123000389349 .					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	ty company l	here:			
The new name must be distinguishable and contain the words "Limited Liability	Company " the	designation "LLC" or t	he ubbrov	iation "I	
	company, the	designation (SEC) of t	ΣΩ	2023	
Enter new principal offices address, if applicable:			- 	<u>∷</u> ,>>	*****
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>	<u>-</u> =	
			SS: XXX	_8	
			ini Th	A	
Enter new mailing address, if applicable:			<u> </u>	=	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	_ <u>\</u> 2	
			100		
	· · · · · · · · · · · · · · · · · · ·			<u>. </u>	
B. If amending the registered agent and/or registered office ad	dress on our	records, enter the	name of	the nev	w registere
agent and/or the new registered office address here:					
Name of New Registered Agent:				 -	
New Registered Office Address:					
	Enter Fl	orida street address			
		. Florida	1		
	City	, Florida	7	lip Code	
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agree	to act in thi:	s capacity. I further	agree :	to comi	oly with the
provisions of all statutes relative to the proper and complete p	erformance c	of my duties, and L	am fami	liar wii	th and
accept the obligations of my position as registered agent as pro-	ovided for in	Chapter 605, F.S.	Or, if th	ns doci	ment 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	Ana M Raya	3008 Harvard Cir La Belle Fl. 33935	D-Add
			□Remove
			□Change
MGR_	Juan Lopez-Alviz	3008 Harvard Cir LaBelle Fl. 33935	DAdd
			□Remove
			□ Change
			□Add
			□Remove
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			🗀 Add
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