00 5666

(Ře	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Cenified Copies	Certificates o	of Status
Special Instructions to Filia	ng Officer:	

Office Use Only



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2024 AFR 19 PH 4: 52



2024 APR 19 PM 4: 06

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR TALLAHASSEE, FL 32309

EXAMINER'S INITIALS:____

(850) 491-9625 Brandon (850) 524-5437 Teresa (850) 524-6243 Rich

Please use funds from account: 120210000160: \$25.00 Authorization Signature:				
Business Name: Document # Certified Copy Certificate of Sta	L24000056	Landscaping, LLC 660		
NEW FILINGS	&	<u>AMENDMENTS</u>		
Profit CorpNot for ProfitLimited LiabilityDomesticationLLLPCorpIncOther		_XAmendmentResignation / WithdrawalChange of Registered AgentRevocation of DissolutionMergerArticles of ConversionAmended & Restated Articles of IncorporationStatement of Authority		
APOSTILLE(s)	&	OTHER FILINGS		
Apostille(s)Country(s)		Foreign FilingReinstatementQualificationFictitious NameAnnual Report		

COVER LETTER

TO:	Registration Se Division of Cor			
CITO II	La Juanita I	landscaping, LLC		
AUBJE		Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Juana Rafael Lucas		
			Name of Person	
		La Juanita Landscaping, Ll	LC	
			Firm Company	
		17418 Dowling Dr		
			Address	
		Fort Myers, FL 33967		
			City/State and Zip Code	
		juana.lucas5@icloud.com	to be used for future annual report notif	
For fur	ther information e	oncerning this matter, please ea	-	gearton
Juana I	Rafael Lucas		239 603-1125 at ()	
	Name o	f Person	Area Code Daytime	e Felephone Number
Enclose	ed is a check for th	ne 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 enclosed)

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 OF

La Juanita Landscaping, ELC			
(Name of the Limit	ed Liability Comp (A Florida Limited	any as It now appears on our recu Liability Company)	ग्रह्मः)
he Articles of Organization for this Limited Li	ability Company	were filed on <u>01/30/2024</u>	and assigned
orida document number L24000056660	·		
his amendment is submitted to amend the follo	owing:		
. If amending name, enter the new name of	f the limited liab	oility company here:	
he new name must be distinguishable and contain the w	and "Limited Link	ility Company " the designation "!	1 t " or the abbreviation "1 t (' "
•		N/A	
nter new principal offices address, if applic		THE CONTRACTOR OF THE CONTRACT	202H API
Principal office address MUST BE A STREE	T ADDRESS)		<u> </u>
			
			P
nter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE BOX)			- ഗ
			- 10
i. If amending the registered agent and/or r gent and/or the new registered office addres	~ .	address on our records, <u>ent</u>	er the name of the new regis
Name of New Registered Agent:	N/A		Market Market Control of the Control
New Registered Office Address:	N/A		
· 		Enter Florida street add	hess
	N/A		Florida
	-	Circ	Zip Code

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 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	Carlos Benito Lucas	3820 22nd Ave NE Naples, Ft. 34125	≘ Add
			[]Remove
			Change
			□Remove
			Change
			Add
			<u>URemove</u>
			TChange
			□Remove
			⊟Remove
			\(\times \) Add
			□ Remove
			T. Change

N/A		
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· 		
		
		
	04/19/2024	
fective date, if other than the an effective date is listed, the date muote: If the date inserted in this bocument's effective date on the D	st be specific and cannot be prior to date of lock does not meet the applicable sta	(optional) of filing or more than 90 days after filing.) Pursuant to 605 0207 nuttory filing requirements, this date will not be listed as
record specifies a delayed effectivis filed.	re date, but not an effective time, at	12:01 a.m. on the earlier of: (b) The 90th day after the
April 19	2024	
		epresentative of a member
	Signature of a member of authorized re	rpresentative of a member
Juana Rafael Lucas		
<u></u>	Typed or printed name	of signee

Filing Fee: \$25.00