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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	rporations				
	CO LANDSCAPING LLC				
SUBJECT:	Name of Limi	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	FLORES, FRANCISCO				
		Name of Person			
	FRANCISCO LANDSCAI	PING LLC			
		Firm/Company			
	2898 REGAL LN				
		Address			
	OVIEDO, FL 32765	•	크음	2024 HAR	اجا معا
		City/State and Zip Code	70	AR .	
	INFO@TAXACENTER.CO			22	
		to be used for future annual report notification)	(20) (20) (11)	₽ .	
For further information of	concerning this matter, please co	all:	11'S	2: 45	سب
ALEJANDRO FRANC	ISCO	321 527-1508 at ()	<u> </u>	ţ	
Name (of Person	Area Code Daytime Telephone N	lumber		
Enclosed is a check for t	the following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Ce	0.00 Filing For rtificate of Straified Copy ditional copy is	tatus &	
Mailing Addre		Street Address:			
Registration	Section Corporations	Registration Section Division of Corporations			
P.O. Box 63	-	The Centre of Tallahassee	:		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRANCISCO LANDSCAPING LLC

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

	(A Florida Limited L	iability Company)	2 2
The Articles of Organization for this Limited Li Florida document number L24000097800	ability Company	were filed on <u>CD</u>	al 2024 Tand as Taned
This amendment is submitted to amend the following	owing;		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabili	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:		<u> </u>
(Principal office address MUST BE A STREE	T ADDRESS)	-	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or ragent and/or the new registered office addre	egistered office a ss here:	address on our records,	enter the name of the new registered
Name of New Registered Agent:	ALEJANDRO I	FRANSICO	
New Registered Office Address:	2898 REGAL L		
		Enter Florida street	
	OVIEDO	City	, Florida 32765 Zip Code
		* 14	•

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>	Name	Address	Type of Action
AMBR	FRANCISCO FLORES		⊐Add
			Remove
			□Change
AMBR	ALEJANDRO FRANCISCO	2898 REGAL LN	■Add
		OVIEDO, FL 32765	□Remove
			Change
			Remove
			□Add
			Remove
			UAdd
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		04/24/2024				
If an effective date is listed Note: If the date inser	ter than the date of filing d, the date must be specific an arted in this block does not date on the Department of	ng: nd cannot be prior to meet the applical	o date of filing or ible statutory fil	more than 90 da	(optional) ys after filing.) Po ats, this date wi	ursuant to 605.0207 (3 Il not be listed as the
ne record specifies a del ord is filed.	layed effective date, but no	ot an effective tin	ne, at 12:01 a.n	n, on the earlie	r of: (b) The 9	Oth day after the
Dated APRIL 24		2024				
	Signature of a	member or author	nzed representat	ive of a member		
	DRO FRANCISCO					

Filing Fee: \$25.00