H25000304755 3

Florida Department of State
Division of Corporations

Florida Department of State
Division of Corporations

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To:

Division of Corporations

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From:

Account Name : ZENBUSINESS INC.
Account Number : 120230000190
Phone : (844)449-3624
Fax Number : (512)597-0678

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE DIGITAL BOOMER LLC

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K. SALY

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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2025 KUS 20
ALLAMASSEE FLOORS

The Digital Boomer 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  $\frac{4/21/2025}{1}$ \_\_\_\_\_ and assigned Florida document number <u>L25000188901</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Trusted Turf and Landscape LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L L.C." Enter new principal offices address, if applicable: (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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_. Florida \_\_\_

## 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.

It Changing Registered Agent, Signature of New Registered Agent

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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

5125970678

Title	<u>Name</u>	<u>Address</u>	Type of Action	
AMBR	Austin Thomas Johnson	3994 Conga St	<b>≣</b> Add	
		Jacksonville, FL 32217	□Remove	
			□Change	
			QAdd T Remove 28	
			Remove 28 Change	
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Effective date, if other than the date of filing:	residential and commerci	ial properties, delivering reliable and high-quality outdoor solutions.
Effective date, if other than the date of filing:		
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Signature of a member or authorized representative of a member	Note: If the date inserted in thi document's effective date on the record specifies a delayed efferd is filed	2025
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