P01000105551

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** SER M TO FEB 1 8 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: FLORIDA FOUN	I AIN AND LAWN UKNA	MENTS, INC	
DOCUMENT NUMBI	ER: P01000105551			
	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
(CYNTHIA ENGELKING			
_	Name of Contact Person			
-	Firm/ Company			
-	Address			
-		City/ State and Zip Code	:	
For further information	E-mail address: (to be use concerning this matter, please			
Name o	f Contact Person	at (at Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 P	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State)		
P01000105551		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follots Articles of Incorporation:	wing ame	endment(s) to
A. If amending name, enter the new name of the corporation:		
	$Th_{t'}$	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must co "chartered," "professional association," or the abbreviation "P.A,"	iation "C	or p
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
). If amending the registered agent and/or registered office address in Florida, enter the name of the	r->	
new registered agent and/or the new registered office address:	2	
Name of New Registered Agent	h = 4 	•
		* .=
(Florida street address)	<u>-</u> _	r. F
New Registered Office Address: Florida	2	C
New Registered Office Address: Florida	Zip Ço'd e)	
L.	ω	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positi	on.	
Signature of New Registered Agent, if changing		
Signature of New Negintered Agent, if changing		

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	ENGELKING, CYNTHIA JEAN	1815 E. MAIN STREET
Add		_	LEESBURG, FL 34748
Remove			
Kemove 2) Change	VP	ENGELKING, MERL DENIS	1815 E. MAIN STREET
X Add		-	LEESBURG, FL 34748
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles,	, enter change(s) here:
(Attach additional sheets, if necessary). (B	Be specific)
	
	
F. If an amendment provides for an exchange	e, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	nent if not contained in the amendment itself:
(y nor appreudie, maicule 1914)	

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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amen ufficient for approval.	dment(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendment	statement (s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
01/04/202	1	
selecto	director, president or other officer – if directors or officers have not be an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
	CYNTHIA JEAN ENGELKING	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	