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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corpora						
NAME OF CORPORA	TION: Jamie Ross Garden	and Landscape Design Inc	: .			
DOCUMENT NUMBE	P8000066020					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspond	ondence concerning this ma	tter to the following:				
w	illiam M. Ross					
		Name of Contact Persor	n			
Jamie Ross Garden and Landscape Design Incorporated						
Firm/ Company						
27	'01 Forest Circle	•				
		Address				
Ja	cksonville Florida, 32257					
	·	City/ State and Zip Code	e			
w m ro	ss@yahoo.com					
		ed for future annual report	notification)			
For further information c	oncerning this matter, pleas	ee call:		16 AUG 19		
William M. Ross		at (904	864 5323	5 7		
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the	ne following amount made p	payable to the Florida Depa	artment of State:			
□ \$35 Filing Fee	\$43.75 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)	37 M		

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Jamie Ross Garden and Landscape Design Incorporated

(Name of Corporation as currently filed with the Florida Dept. of State)

P8000066020

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Ross Garden Design Inc.

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

No Change

- B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
- C. Enter new mailing address, if applicable:
 (Mailing address MAY BE A POST OFFICE BOX)

No Change

D. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:</u>

Name of New Registered Agent

No Change

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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)

Remove

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.

Mike Jones, V as Remove, and Sally Smith, SV as an Add.					
	ample: Change P		John Doe		
X Ren	nove	v	Mike Jones		
X Add		sv	Sally Smith		
Type of (Check		Title	Name	Address	
1)	Change				
	Add				
	Remove				
2)	Change				
	Add				
	Remove				
3)	Change				
	Add				
	Remove				
4)	Change				
	Add				
	Remove				
5)	Change				
	Add				
	Remove				
6)	Change				
	Add				

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
No Changes	
	•
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
No Changes	

August 1, 2016

The date of each amendment(s) adoption:

date this document was signed.

August 1, 2016

Effective date if applicable:

(no more than 90 days after amendment file date)

, if other than the

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

	•	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/wer		ne number of votes cast for the amendment(s)
		rough voting groups. The following statement vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/we	ere sufficient for approval
by		,,,
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of director	s without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators with	thout shareholder action and shareholder
August Dated	1,2016	
		icer if directors or officers have not been
seli	ected by an incorporator liftin t	he hands of a receiver trustee, or other court

William M. Ross

appointed fiduciary by that fiduciary)

(Typed or printed name of person signing)

Secretary/Treasurer

(Title of person signing)