## P1800090406

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: LUGO'S LAND C	LEARING INC	
DOCUMENT NUMB	ER: P18000090406		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
ı	VAN LUGO VALDES		
-		Name of Contact Person	n
_		Firm/ Company	
-		Address	· · · · · · · · · · · · · · · · · · ·
-		City/ State and Zip Cod	e
<del>.</del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
IVAN LUGO VALDES		239 at (	821-1889 
Name o	Contact Person	Area 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	□\$43.75 Filing Fce & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

LUGO'S LAND CLEARING INC

(Name of C	Corporation as currently filed with the Florid	a Dept. of State)	
P18000090406			
	(Document Number of Corporation (if known	n)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this <i>Florida Profit Corpora</i>	ation adopts the fo	Howing amendment(s) to
A. If amending name, enter the new name	of the corporation:		
			The new
	n the word "corporation," "company," or "i on "Corp," "Inc," or "Co". A professional c n," or the abbreviation "P.A."		
B. Enter new principal office address, if a (Principal office address MUST BE A STRE			
	<del></del>		
C. Putou nou molling address if applicab			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)			
D. If a manding the manifestance and a good and		h 644 -	
new registered agent and/or the new re	er registered office address in Florida, enter t egistered office address:	ne name <u>oi tne</u>	
Name of New Registered Agent			
_	(Florida street address)		····
New Registered Office Address:		Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if chan			
I hereby accept the appointment as registered	d agent. I am familiar with and accept the obli		ijjon. E
		-	2 )
		<u> </u>	1
	Signature of New Registered Agent, if char	nging	2
			<b>7</b>
		<u> </u>	P<)
		<b>5.</b>	0

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 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.

Example: 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	VP	LAZARO S LUGO DIAZ	3310 22ND AVE NE
X Add			NAPLES, FL 34120
Remove			
2) Change		_	
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change	-		
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
<del> </del>	<del> </del>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and and the amendment itself:
(if not applicable, indicate N/A)	nontent if not contained in the amendment tigen.
	<del>-</del>
·	

	her than the
date this document was signed.	
Effective date if applicable:  (no more than 90 days after amendment file date)	_
(no more than 90 days after amenament file adie)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
12/17/2018	
Signature Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
IVAN LUGO VALDES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	_