P22000072014

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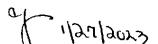
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COVER LETTER

TO: /smendment Section
Division of Corporations

NAME OF CORPOR	ATION: NIKO NURSERY	INC		
DOCUMENT NUME	BER: P22000072014			
	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
	LORENZO CRISTOBAL NI	COLAS LORENZO		
		Name of Contact Person	n	
	NIKO NURSERY INC			
		Firm/ Company		
	314 NW 7TH AVE	, ·		
	Address			
	HOMESTEAD FL 33030			
		City/ State and Zip Cod	e	
	n concerning this matter, plea			
Name of Contact Person		at (70 W	de & Daytime Telephone Number	
	r the following amount made			
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

NIKO NURSERY INC				200124 AM /: U
(<u>Name (</u>	of Corporation as curre	ently filed with the Flo	rida Dept. of State)	
P22000072014			<u> </u>	ALT/7.SSEE. FL
	(Document Number	er of Corporation (if kno	own)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, t	his <i>Florida Profit Corp</i>	oration adopts the foll	owing amendment(s) to
A. If amending name, enter the new na	ame of the corporation	<u>:</u>		
				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	.orp," "Inc," or "Co"	'. A professional corp	rporated" or the abbre oration name must c	viation "Corp"
B. Enter new principal office address. (Principal office address MUST BE A S				
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)				
D. If amending the registered agent at new registered agent and/or the new	<u>id/or registered office :</u> w registered office add	<u>address in Florida, ent</u> ress:	er the name of the	
·		BAL NICOLAS LOREN	ZO	
Name of New Registered Agent	314 NW 7AVE			
		la street address)		
	HOMESTEAD		33(930
New Registered Office Address:		(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	thanging Registered As tered agent. I am famil	vent: liar with and accept the	obligations of the posi	tion.
	Signature of Ne	w Registered Agent, if c	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 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>	<u>John Doe</u>	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			-
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change			
Add			<u>-</u>
Remove			
6) Change			
Add			
Remove			

	veets, if necessary). (
XED MISSPELLING					
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If an amendment p	rovides for an exchan	ige, reclassification	, or cancellation o	of issued shares,	
provisions for imp	dementing the amend	<u>lment if not contair</u>	ned i <u>n the amendi</u>	nent <u>itself:</u>	
	ole, indicate N/A)				
(if not applicat					
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The date of each amendment(s) a date this document was signed.	doption:	if other than the
Effective date if applicable:		
Effective date in appricable:	tno more than 90 days after amendmer	nt file date)
Note: If the date inserted in this bedocument's effective date on the Do	block does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were addaction was not required.	opted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast afficient for approval.	for the amendment(s)
	proved by the shareholders through voting groups. To each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for approv	val
by	(voting group)	"
	(voting group)	
Dated	011/2022	
Duten		
	Trector, president or other officer – if directors or off	
	 d, by an incorporator – if in the hands of a receiver, ted fiduciary by that fiduciary) 	rustee, or other court
	LOILNZO CYISTOBAL NI (Typed or printed name of person signing	colas Lovenzo
	<u>President</u>	
	(Title of person signing)	