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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CO | RPORATION: ENEA GA | POEN DESIGN, | inc | | |
|-------------------|--|--|--|--|--|
| | NUMBER: <u>PO 6000032</u> | | | | |
| The enclosed Ar | ticles of Amendment and fee are su | bmitted for filing. | | | |
| Please return all | correspondence concerning this ma | tter to the following: | | | |
| | SHERRY GOI | N2AUE2 Name of Contact Person N DESIGN, INC Firm/Company | | | |
| | | Name of Contact Person | 1 | | |
| | ENEA GAPDE | IN DESIGN, INC | ·/ | | |
| | | Firm/ Company | | | |
| | 7610 NE | 4th ct #81 | | | |
| | 7610 NE 4 th ct # 81 Address | | | | |
| | MIAMÍ, FI | Address 33138 City/ State and Zip Cod | | | |
| | | City/ State and Zip Cod | e | | |
| | n. chea a enea | | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | | |
| | mation concerning this matter, please GONZALE 2 Vame of Contact Person | | 576-6702 | | |
| None Park | Vame of Contact Person | Area Co | de & Daytime Telephone Number | | |
| | eck for the following amount made | payable to the Florida Depa | | | |
| S35 Filing F | See 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 | · · · · · · · · · · · · · · · · · · · | Address Iment Section | | |
| | Division of Corporations | | on of Corporations | | |
| | P.O. Box 6327 | | Building | | |
| | Tallahassee, FL 32314 | | Executive Center Circle assee, FL 32301 | | |

Articles of Amendment

Articles of Incorporation

ENEA GARDEN DESIGN, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

| P060 | 1000327 | - LU | | | |
|--|-------------------------|------------------------|-----------------------|-------------|-------------|
| (Docume | ent Number of | Corporation (if knows | n) | | |
| Pursuant to the provisions of section 607.1006. Florida sits Articles of Incorporation: | Statutes, this F | lorida Profit Corpor | ation adopts the foll | lowing am | iendment(: |
| A. If amending name, enter the new name of the corp | poration: | | | | |
| NIA | | | | | |
| name must be distinguishable and contain the word "Corp" "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ac | ""Inc," or "C | o". A professional | | he abbre | |
| B. Enter new principal office address, if applicable: | | N/A | | | |
| (Principal office address MUST BE A STREET ADDR | | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registere | ed <u>office ad</u> dre | N A | the name of the | 2017 NOV 13 | |
| new registered agent and/or the new registered of | ffice address: | | | 7 | |
| Name of New Registered Agent | N/A | | | 135 | \cup |
| | | | 77. 75. | <u>.</u> | |
| | (Florida stree | et address) | | | |
| M. n | | | Phadas | | |
| New Registered Office Address: | | City) | , Florida | (Zip Code | |
| | · | • | | | |
| New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I | am familiar wi | | | tion. | |
| Signat | ture of New Re | gistered Agent, if cha | inging | | |

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: \underline{X} Change | <u>PT</u> | John Doc | |
|---------------------------------|--------------|-----------------|---|
| 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> | <u>Addres</u> s |
| 1) Change | _D | SHERRY GONZALEZ | 7580 NE 4th CT \$ 105 |
| X_ Add | | | 7580 NE 4th CT \$105 MIAMI, FL 33138 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | idditional sheet | ţs, if necessary). | ticles, enter cha (Be specific) | | | | |
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| an an | aendment pro | vides for an exc | hange, reclassif | fication, or cance | ellation of issued | shares, | |
| rovisi | ions for impler | menting the am | endment if not | contained in the | amendment itse | <u>lf:</u> | |
| | not applicable, | , indicate N/A) | | | | | |
| | <u> </u> | | | | | | |
| N) | | | | | | | |
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| The date of each amendment(s) adoption: | , if other than the |
|--|---|
| date this document was signed. | |
| Effective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| Note: If the date inserted in this block does n document's effective date on the Department of | ot meet the applicable statutory filing requirements, this date will not be listed as the State's records. |
| Adoption of Amendment(s) (CH | ECK ONE) |
| ☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a | shareholders. The number of votes cast for the amendment(s) pproval. |
| | shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the amer | dment(s) was/were sufficient for approval |
| by(vol | ··· |
| (vol | ing group) |
| The amendment(s) was/were adopted by the action was not required. | board of directors without shareholder action and shareholder |
| ☐ The amendment(s) was/were adopted by the action was not required. | incorporators without shareholder action and shareholder |
| Dated | 17 12. |
| (By a director, pres selected by an inco appointed fiduciary | dent or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court by that fiduciary) |
| CAR | OLINA MONTEIRO DA SILVA |
| - | Typed or printed name of person signing) |
| | \checkmark |
| | (Title of person signing) |