## Ph 6000 32720

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | dress)             | <del></del> |
| (Ad                     | dress)             |             |
| (Cit                    | ry/State/Zip/Phone | e #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nan  | ne)         |
| (Do                     | cument 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 CORPORA                   | TION: ENEZ GE                               | rden Design,   | Inc  |
|-----------------------------------|---|--|--|
| DOCUMENT NUMBE                    |   | 00032720   |  |
| The enclosed Articles of          | Amendment and fee are su                    | ebmitted for filing.   |  |
| Please return all correspo        | ondence concerning this ma                  | tter to the following:   |  |
|                                   | Sherry                                      | Sonzole 2 Name of Contact Perso                                    | n  |
| _                                 | Enea Gard                                   | Cen Design, In Firm/Company  | nc   |
| _                                 |   | 4th ct , Su  |  |
| _                                 | Mizmi,                                      | FL 33138<br>City/ State and Zip Cod                                | e  |
|                                   | E-mail address: (to be us                   | Genea.ch   | notification)  |
| For further information of        | concerning this matter, pleas               | se call:   |  |
| Sherry Go                         | nzdez<br>Contact Person                     | at ( 305   | be & Daytime Telephone Number  |
| Name of                           | Contact Person                              | Area Co  | de & Daytime Telephone Number  |
| Enclosed is a check for t         | he following amount made                    | 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) |
| Mailing Address Amendment Section |   |  | Address<br>Iment Section   |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

| (Name of Corporation a  | as currently filed with the l  | Florida Dept. of State)    | -                                     |           |
|---|--------------------------------|----------------------------|---------------------------------------|-----------|
| P06000032720  |                                |                            |                                       |           |
|   | Number of Corporation (if      | known)                     |                                       |           |
| Pursuant to the provisions of section 607,1006, Florida Statist Articles of Incorporation:  | atutes, this Florida Profit Co | orporation adopts the fol  | lowing amendm                         | ent(s) to |
| A. If amending name, enter the new name of the corpo  | oration:                       |                            |                                       |           |
|   |                                |                            | The nev                               | 117       |
| name must be distinguishable and contain the word " "Corp" "Inc" or Co.," or the designation "Corp," ' word "chartered," "professional association," or the abb | "Inc." or "Co". A professi     |                            |                                       |           |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE  | <u></u>                        |                            |                                       |           |
|   |                                |                            | 153 2<br>153 2                        | 71        |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   |                                |                            | # # # # # # # # # # # # # # # # # # # |           |
| D. If amending the registered agent and/or registered   | office address in Florida, e   | nter the name of the       |                                       |           |
| new registered agent and/or the new registered offi   |                                |                            |                                       |           |
| Name of New Registered Agent  |                                |                            |                                       |           |
|   | (Florida street address)       |                            |                                       |           |
| New Registered Office Address:  |                                | . Florida                  |                                       |           |
|   | (City)                         |                            | (Zip Code)                            |           |
| New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an   |                                | ne obligations of the posi | tion.                                 |           |
| <u> </u>  | re of New Revistered Avent     | if ahawaina                |                                       |           |

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: XChange              | <u>PT</u>    | John Doe                |                  |
|-------------------------------|--------------|-------------------------|------------------|
| X Remove                      | <u>V</u>     | Mike Jones              |                  |
| X Add                         | <u>sv</u>    | Sally Smith             |                  |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>             | <u>Addres</u> s  |
| I) Change                     |              | Carolina Mateiro DaSilv | 2 7580 NE 4th Ct |
| Add                           |              |                         | Suite 7580-105   |
| Kemove                        |              |                         | Mismi, FL 33138  |
| 2) Change                     |              |                         |                  |
| Add                           |              |                         |                  |
| Remove                        |              |                         |                  |
| 3 ) Change                    |              |                         |                  |
| Add                           |              |                         |                  |
| Remove                        |              |                         |                  |
| 4) Change                     |              | _                       |                  |
| Add                           |              |                         |                  |
| Remove                        |              |                         |                  |
| 5) Change                     |              |                         |                  |
| Add                           |              |                         |                  |
| Remove                        |              |                         |                  |
| 6) Change                     |              |                         |                  |
| Add                           |              |                         |                  |
| Remove                        |              |                         |                  |

| If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A) | If amending or adding additional Arti<br>Attach additional sheets, if necessary). | (Be specific)  |
|--|---|--|
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   | · · · · · · · · · · · · · · · · · · ·                      |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   | · · · · · · · · · · · · · · · · · · ·                      |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  | If an amendment provides for an exch  | hange, reclassification, or cancellation of issued shares, |
|  | provisions for implementing the amer  | endment if not contained in the amendment itself:          |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |

| The date of each amendment(s) adopt  | tion:  | , if other than the                 |
|--|--|-------------------------------------|
| date this document was signed.   |  |                                     |
| Effective date if applicable:  | 6/20/18  |                                     |
|  | (no more than 90 days after amendment file date)   |                                     |
| Note: If the date inserted in this block document's effective date on the Depart | k does not meet the applicable statutory filing requirements, tment 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 adopted<br>by the shareholders was/were suffic       | d by the shareholders. The number of votes cast for the amendient for approval.  | iment(s)                            |
|  | ed by the shareholders through voting groups. The following sch 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)   |                                     |
| ,  | (voting group)   |                                     |
| ☐ The amendment(s) was/were adopte action was not required.                      | d by the board of directors without shareholder action and shareholder action ac | reholder                            |
| The amendment(s) was/were adopted action was not required.                       | d by the incorporators without shareholder action and sharehol   | lder                                |
| Dated 612  | 0/18   |                                     |
|  | W  |                                     |
| Signature  | tor president or other officer – if directors or officers have no  | t haun                              |
|  | y an incorporator – if in the hands of a receiver, trustee, or oth   |                                     |
|  | fiduciary by that fiduciary)   |                                     |
|  | Sharru Gonzalez  |                                     |
| _  | (Typed or printed name of person signing)  | <del></del>                         |
|  | Director   |                                     |
|  | (Title of person signing)  |                                     |