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(City	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION:	Nanak's Landscaping, I	nc.
DOCUMENT NU	OCUMENT NUMBER: 553360		
The enclosed Artic	les of Amendment and fee a	are submitted for filing.	
Please return all co	rrespondence concerning th	is matter to the following:	
		rian R. Kopelowitz	
		Name of Contact Person	
	, k	Kopelowitz Ostrow	
	Firm/ Company		
200 SW 1st Avenue, 12th Floor			_
Address			
	Fort	Lauderdale, FL 33301	
•		City/ State and Zip Code	
	deva@nar E-mail address: (to be use	nakslandscaping.com ed for future annual report notification)	
For further informa	ation concerning this matter,	, please call:	
B	rian Kopelowitz	at (954) 52 Area Code & Daytime Tel-	25-4100
Name	of Contact Person	Area Code & Daytime Tel-	ephone Number
Enclosed is a check	k for the following amount r	nade payable to the Florida Depart	tment of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & 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)
P.O. Box 63	t Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	e

Tallahassee, FL 32301



September 18, 2009

BRIAN R. KOPELOWITZ KOPELOWITZ OSTROW 200 SW 1ST AVENUE - 12TH FLOOR FORT LAUDERDALE, FL 33301

SUBJECT: NANAK'S LANDSCAPING, INC.

Ref. Number: 553360

We have received your document for NANAK'S LANDSCAPING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Photo copies are not acceptable and please complete the form in its entirety.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 209A00030811

MICCELVEY

009 OCT -2 AH S: 00

SECRETARY OF STATE

Articles of Amendment to Articles of Incorporation of

,	O1		_
Nanak's 1	andsca pini	g, Inc.	090
(Name of Corporation as curr	ently filed with the Florid	ia Dept. of State)	~
5533	1		
	<u> </u>		
(Document Nu	mber of Corporation (if kno	own)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:)6, Florida Statutes, this F	<i>lorida Profit Corporation</i> adopt	s the follow
A. If amending name, enter the new name of	of the corporation:		
· · · · · · · · · · · · · · · · · · ·			
name must be distinguishable and contain			The new
abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc	c," or "Co". A professional con	or me poration
B. Enter new principal office address, if app	olicable:		
(Principal office address MUST BE A STREE			
	****	· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable			
(Mailing address <u>MAY BE A POST OFFI</u>	(CE BOX)		
	****·		
	,		
D. If amending the registered agent and/or		n Florida, enter the name of the	<u> </u>
new registered agent and/or the new regi	stered office address:		
Name of New Registered Agent:			
-			
Non-Boston Low- Allins	(El +1 4)	7.7	
New Registered Office Address:	(Florida street a	idaress)	
		. Florida	
	(City)	, Florida (Zip Code)	
		-	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		and account the obligations of the	anitiou
I nevery accept the appointment as registered a	igent. 1 um jamutar with a	ma accept the obligations of the p	OSHION.
S	Signature of New Registered	d 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>coo</u>	Ronald Hayes	3260 NW 23rd Avenue Suite 400 Pompano Beach, FL 33069	_ □ Add _ □ Remove
	**************************************		_ □ Add □ □ Remove
			_ ☐ Add _ ☐ Remove
	ling or adding additional Articles, en dditional sheets, if necessary). (Be sp		
provisi	nendment provides for an exchauge, ons for implementing the amendment out applicable, indicate N/A)	reclassification, or cancellation of i	ssued shares, t itself:

The date of each amendmen	t(s) adoption: 💇	9/03/2009
Effective date if applicable:	09/03/2009	(date of adoption is required)
/	(no more than s	90 days after amendment file date)
Adoption of Amendment(s)	(CI	HECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
		he shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	ndment(s) was/were sufficient for approval
by		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the	e board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the	e incorporators without shareholder action and shareholder
Dated	130/09	
selo	ected, by an incor	dent or other officer if directors or officers have not been reporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
	DE (Ty	EVA S. KHAL SA pped or printed name of person signing)
	(Title o	PRESIDENT of person signing)