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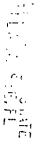
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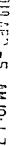


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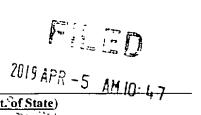
COVER LETTER

TO: Amendment Section Division of Corporations

The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Albert L. Kelley Name of Contact Person Albert L. Kelley, P.A. Firm/ Company 926 Truman Ave Address Key West. Fl. 33040 City/ State and Zip Code keywestlaw@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Albert Kelley Name of Contact Person Area Code & Daytime Telephone Numb Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee Certificate of Status Certified Copy (Additional copy is Certified Copy	AME OF CORPOR	RATION: ALVEREZ LAND	SCAPING INC		
Albert L. Kelley Name of Contact Person Albert L. Kelley, P.A. Firm/ Company 926 Truman Ave Address Key West. F1. 33040 City/ State and Zip Code keywestlaw@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Albert Kelley Name of Contact Person The Company 296-0160 Area Code & Daytime Telephone Numb Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional copy is Certified Copy (Additional copy is Certified Copy (Certified Copy (Certified Copy) (Certified Copy)		P16000019651			
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enclosed) (Additional Copy is enclosed)	\$35 Filing Fee		Certified C	ору	Certificate of Status Certified Copy (Additional Copy
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle	Amendment Section Division of Corporations P.O. Box 6327		Amendment Section Division of Corporations Clifton Building		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



ALVEREZ LANDSCAPING INC

ion (if known) rofit Corporation adopts the following amendment(s) to
ion (if known) rofit Corporation adopts the following amendment(s) to
rofit Corporation adopts the following amendment(s) to
The new
pany," or "incorporated" or the abbreviation professional corporation name must contain the
orida, enter the name of the
Ų.
, Florida
(Zip Code)

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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		 ***
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		 <u> </u>
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_	<u></u>	
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)		

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f an amendment provides for an exch	ange, reclassification,	t in the amendment itself	2011 (23)
provisions for implementing the ame	ange, reclassification, and ment if not contained	d in the amendment itself	<u> </u>
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, idment if not containe	d in the amendment itself	<u>.</u>
provisions for implementing the ame	ange, reclassification, idment if not containe	d in the amendment itself	<u>c.</u>
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provisions for implementing the ame	ange, reclassification, adment if not contained	d in the amendment itself	<u>[:</u>

The date of each amendment(s) a date this document was signed.	foption:, if other t
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this lead ocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes east for the amendment(s) efficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated_ 4 -	3-19
	3-19 11
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	Fredy Alvarez
	(Typed or printed name of person signing)
	President
	(Title of person signing)