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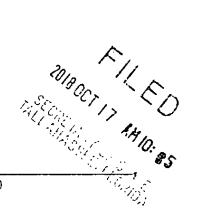
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: JEIMAG ULTIMA	ATE CABINETS, INC.	
DOCUMENT NUN	POSOBORASA		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Jeilen Martinez Lorenzo		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1
	Citywide Nursery, Inc.		
		Firm/ Company	
	1050 NE 43rd Street	• •	
		Address	
	Oakland Park, FL 33334		
		City/ State and Zip Cod	<u></u>
city	widelawnservice@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Jeilen Martinez Lorenzo		954 at (de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



JEIMAG ULTIMATE CABINETS, INC.

(<u>Name (</u>	or Corporation as curren	itly filed with the Florida Dept. of State)	
P0300008626			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new na	ame of the corporation:		
Citywide Nursery, Inc.		The new	
	nation "Corp," "Inc." or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1050 NE 43rd Street	
		Oakland Park, FL 33334	
C. Estan san mailine adduse if soll			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		1050 NE 43rd Street	
		Oakland Park, FL 33334	
D. If amending the registered agent an new registered agent and/or the new		dress in Florida, enter the name of the	
N/A		_	
Name of New Registered Agent		· · · · · · · · · · · · · · · · · · ·	
	(Florida :	street address)	
New Registered Office Address:	N/A	, Florida	
<u>New Registerea Office Address:</u>		(City) (Zip Code)	
N D : 4 14 41 5:			
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: r with and accept the obligations of the position.	
	Signature of New	Registered Agent, if changing	
		The control of the principles	

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sp	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				·
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: (Re specific)
N/A	
<u> </u>	
-	
E. If an amandment provides for an avaluation	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	ange, reclassification, or cancertation of issued shares, indirect if not contained in the amendment itself:
(if not applicable, indicate N/A) N/A	
11/11	
···	

10/16/201 The date of each amendment(s) adoption:	if other than t
date this document was signed.	II oner tilan s
10/16/2018	
Effective date if applicable:	
(no n	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not mee document's effective date on the Department of State's	et the applicable statutory filing requirements, this date will not be listed as records.
Adoption of Amendment(s) (CHECK (<u>ONE</u>)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approva	olders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment	
by(voting gre	
(voting gro	эир)
☐ The amendment(s) was/were adopted by the board of action was not required.	of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incorporaction was not required.	orators without shareholder action and shareholder
DatedSignature	
(By a director, president o	r other officer – if directors or officers have not been or – if in the hands of a receiver, trustee, or other court at fiduciary)
Jeilen Martinez Lo	orenzo
(Typed	or printed name of person signing)
President	
	(Title of person signing)