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COVER LETTER

TO: Amendment Section
Division of Corporations

. . .

NAME OF CORPO	Paul Campo Inc		
DOCUMENT NUM	1BER:		 -
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Paul J Campo		
		Name of Contact Person	1
	Paul Campo Inc.		
		Firm/ Company	
	381 23rd Street Sw	, ,	
		Address	
	Naples FL 34117		
	<u> </u>	City/ State and Zip Code	<u> </u>
	pcampolawnworks@aol.co	om.	
	· · · · · · · · · · · · · · · · · · ·	sed for future annual report	natification
For further informat	ion concerning this matter, plea	se call:	641-0714
Nam	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Paul Campo Inc	
(Name of Corporation as	currently filed with the Florida Dept. of State)
P03000086959	
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
	The new
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviati	vation," "company," or "incorporated" or the abbreviation "Corp.," "Co", A professional corporation name must contain the word on "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRES</u>	(\overline{x})
C. Enter new mailing address, if applicable:	. 23
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	PH PS: C
	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
nes negative vigice maters.	(City) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent: I familiar with and accept the obligations of the position.
	CM D in the SC L in
Signature	of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: X_Change	<u>PT</u>	John Doe	Phil Camp
X Remove	<u>V</u>	Mike Jones	<u>, </u>
_X Add	_ <u>sv</u>	Salty Smith	p.C.
Type of Action (Check One)	Title	<u>Name</u>	Address Eversledes Blvd M.
1) Change	VP	Brandon Alan Campo	57 € Everglades Blvd N
X Add			Naples, Ft 34120
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) 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)	. '		(Be specific)			
f 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)						
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	04/01/2020	
The date of each amendment(s) ad	option:	, if other than th
date this document was signed.	4.10000	
U4/U Effective date <u>if applicable</u> :	1/2020	
Effective date il applicable.	(no more than	90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep		licable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators, or	r board of directors without shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were suf		the number of votes east for the amendment(s)
		nrough voting groups. The following statement o vote separately on the amendment(s):
"The number of votes cast i	for the amendment(s) was/w	vere sufficient for approval
by		"
	(voting group)	
4/19/20		
Dated		
Signature	Pel D	
(By a di	rector, president or other of	ficer – if directors or officers have not been
	•	the hands of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciar	y)
	Paul J Campo	Field (
-	(Typed or printed	d name of person signing)
	/	resident
•	(Title of person s	