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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	TION: TREESCAPES, IN	₹C.					
DOCUMENT NUMBE				<del></del> .			
The enclosed Articles of	Amendment and fee are su	bmitted for filin	g.				
Please return all correspo	ondence concerning this ma	tter to the follow	ing:				
G	UILLERMO CARCAMO						
	Name of Contact Person						
		Firm/ Co	ompany				
50	5654 forester pond ave						
_	Address						
S.	ARASOTA, FL 34243						
<del></del>		City/ State a	nd Zip Code	2			
	E-mail address: (to be us	sed for future an	nual report	notification)			
For further information of	oncerning this matter, pleas	se call:					
GUILERMO CARCAM	at (	941	921-9436 de & Daytime Telephone Number				
Name of	Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for the	ne following amount made	payable to the F	lorida Depa	rtment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fili Certified C (Additional enclosed)	ору	□\$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 Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

TREESCAPES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P06000042709 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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)

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	$\underline{\mathbf{Y}}$	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
l) Change	D	HERMANN A CARCAMO	4724 COUNTRY OAKS BLVD			
XX Add			SARASOTA, FL 34243			
Remove						
2) Change						
Add						
Remove						
3 ) Change						
Add						
Remove						
4) Change		<u> </u>				
Add						
Remove			-			
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
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<u>If an amendment provides for an excl</u>	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate NA)	endment if not contained in the amendment itself:
(tj noi applicable, trialcale MA)	

The date of each amendment(s)	08/01/2024 ) adoption:	, if other than th
date this document was signed.		
0 Effective date <u>if applicable</u> :	8/01/2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this e Department of State's records.	date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	t(s)
	approved by the shareholders through voting groups. The following states for each voting group entitled to vote separately on the amendment(s):	ment
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	der
08/01/24 Dated Signature		
sele	a director, president or other officer – if directors or officers have not bee cted, by an incorporator – if in the hands of a receiver, trustee, or other cobinted fiduciary by that fiduciary)	
	GUILLERMO CARCAMO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	