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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: <u>Southland</u> L	and scaping + Lowi	Service, Inc	
DOCUMENT NUMBE	P · t adas .	9512		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ondence concerning this ma	tter to the following:		
	B C	Name of Contact Person Name of Contact Person Name of Contact Person Name of Contact Person Firm/ Company 719 NW 7 AVE Address Minmi FL 33 City/ State and Zip Code on & B Chriso accessed for future annual report	108	
	concerning this matter, pleas	se call:		
Name of	Contact Person	at (at () 775-3325 le & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Depa	irtment of State:	
S35 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

Southland Landsca (Name of Corporati	6000069=	512		
(Docur	nent Number of	Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Florid is Articles of Incorporation:	a Statutes, this F	Torida Profit Corpo	ration adopts the follow	ing amendment(s)
A. If amending name, enter the new name of the c	orporation:			
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A	ompany," or "incorp professional corpo	porated" or the abbrevial ration name must conta	The new tion "Corp.," ain the word
B. <u>Enter new principal office address, if applicable</u> Principal office address <u>MUST BE A STREET AD</u>	<u>e:</u>			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>2X</u>)			
. If amending the registered agent and/or registenew registered agent and/or the new registered			r the name of the	
Name of New Registered Agent				
				23
	(Florida stre	et address)		.: :
New Registered Office Address:	('City)	, Florida(Zij	20 :
				20 - 1 - 20 - 20 - 20 - 20 - 20 - 20 - 2
New Registered Agent's Signature, if changing Rej hereby accept the appointment as registered agent.	gistered Agent: - Lam familiar w	ith and accept the o	bligations of the position	 -

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: \underline{X} Change	PT John l	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>R</u> Change	_D_	Hernon Nunez	5350 SW 130 Terr
Add		ŕ	Micama, FL 33027
Remove	P	JAVIER M OSORIU	1470 NE 16851 # 1
2) Change Add		JAN IL WIN VOUNT	NORTH MIAMI BEACH FL 33162
Remove 3) Change	ID	DIMAS ESDVIVEL	
X Add			1970 NE 16851 # 1
Remove			NORTH MINION BUIL FL 33/62
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Romano			

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)	маси аааанопан sneets,	if necessary). (Be sp	recific)			
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, thi document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendm by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement be separately provided for each voting group entitled to vote separately on the amendment(s):	'ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Dated 6-9-2023	
Signature Addles	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other	
appointed fiduciary by that figure ary)	
HERUPN NOWEZ	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	