

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002031953)))



H110002031853ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser	from	this
page. Doing so will generate another cover sheet.	•	

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : M & M ASSOCIATES GROUP CORP.

Account Number : I20100000034 Phone : (305)698-8171

Fax Number : (305)698-8172

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

RECEIVED

I AUG 15 AM 8: 17

CRETARY OF STALL

LLAHASSEE, FLORE

OR AMND/RESTATE/CORRECT OR O/D RESIGN
PREMIUM LANDSCAPING CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Amend 108/16/11

Articles of Incorporation

PREMIUM LANDSCAPING CORP (Name of Corporation as currently filed with the Florida Dept. of State) P06000122346 (Document Number of Corporation (if known)

If amending name, enter the new nam	X		,	The new
me must be distinguishable and conta breviation "Corp.," "Inc.," or Co.," or tme must contain the word "chartered,"",	the designation "C	orp, " "Inc, " or "C	o". A professional	ted" or the corporation
Enter new principal office address, if a		N/A		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		N/A		
		N/A		
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		N/A		11 AUG 15 FA
		N/A		_ tue
				- 5
If amonding the registered agent and/o			i, enter the name of	the 3
Name of New Registered Agent:	N/A			,
	N/A			
New Registered Office Address:	(Flor	ida sireei address)		
•	N/A		, Florida	
	(City)		(Zip Code)	

Page 1 of 3

(((H11000203195 3)))

If amending the Officers and/or Directors, enterphentitle and page gleach officer/director being removed and title, name, and address of each Officer and/or Director being added; (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address.	Type of Action
<u>VP</u>	GONZALO FLORES	405 WEST 76th STREET HIALEAH, FL	
			— -
			Add Remove
NONE	dditional sheets, if necessary). (Be s		
provisi	mendment provides for an exchange ons for implementing the amendmen not applicable, indicate N/A)	, reclassification, or cancellation of nt if not contained in the amendme	issued shares, nt itself:
NONE			

Page 2 of 3

(((H11000203195 3)))

The date 🌠 each amendmen	t(s) adoption: 08/81/49100203195 3)))
Effective date <u>if applicable</u> :	07/01/2011
4	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes east for the amendment(s) tere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	**
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_08/0	01/2011
Signature _	Prostrum
šel	director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
~~.	······································
	CARLOS E LEMUS
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Page 3 of 3

(((H11000203195 3)))