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| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE TALLAHASSEE FLORID

2019 JAN 10 PM 3: C

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: | INDOOR | GANDENS | INCURPORATED | - 25 |
|--|---------------------|--|--|----------|
| DOCUMENT NUMBER: | P070 | 6010184 | 3 | - 7 |
| The enclosed Articles of Amendme | nt and fee are sub | mitted for filing. | | |
| Please return all correspondence co | ncerning this matte | er to the following: | | • |
| | T | Name of Contact Personal Sand Company Sand Sand Sand Firm/ Company Sand Sand Address | CDENS | |
| | | i tor tutar te | Code | <u>.</u> |
| For further information concerning | this matter, please | call: | | |
| ENRIQUE F | rson | at (<u>30</u> Area | 233 00 Y Code & Daytime Telephone N | <u>U</u> |
| Enclosed is a check for the followin | g amount made pa | yable to the Florida [| Department of State: | |
| ☐ \$35 Filing Fee ☐ \$43.75 | • | □\$43.75 Filing Fee Certified Copy (Additional copy is enclosed) | & 🗷\$52.50 Filing Fee Certificate of Status | |
| Mailing Address Amendment Secti Division of Corpo P.O. Box 6327 | on | An Div | reet Address nendment Section vision of Corporations fton Building | |

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

| | Articles of Amendment | | |
|---|--|---|--------------------|
| | to Articles of Incorporation | Ŷ | |
| | of | `` | 多多 |
| IND00 | R GARDENS, INC | CORPORATED | (A) |
| (Name of Cor | poration as currently filed with the | e Florida Dept. of State) | - K |
| POT | 000101843 | | |
| | Document Number of Corporation (i | f known) | (a) (|
| Pursuant to the provisions of section 607.1006, its Articles of Incorporation: | Florida Statutes, this Florida Profit | Corporation adopts the foll | owing amendment(s) |
| A. If amending name, enter the new name of TRO name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," | PLANT ne word "corporation," "company, "Corp," "Inc." or "Co". A profes | Leasing Sec " or "incorporated" or t | he abbreviation |
| B. Enter new principal office address, if app (Principal office address MUST BE A STREE | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or received agent and/or the new registered agent and/or the new registered agent.) | cegistered office address in Florida, | , enter the name of the | |
| Name of New Registered Agent | | | |
| | | | |
| - | (Florida street address) | | |
| Non Pagistanud Office Address | | Elosido | |
| New Registered Office Address: | (City) | Florida | (Zip Code) |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered a / | gent. I am familiar with and accept | | ion. |
| , | Signature of New Registered Agent | i, ij changing | |

Page 1 of 4

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: <u>X</u> Change | PT | John Do | <u>)c</u> | |
|-------------------------------|-----------|--|-------------|--------------|
| X Remove | V | Mike Jo | <u>nes</u> | |
| X Add | <u>sv</u> | Sally Sn | <u>nith</u> | |
| Type of Action (Check One) | Title | | <u>Name</u> | Address |
| !) Change | | <u>. </u> | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | | |
| Add | | _ | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| Kentove | | | | |
| 5) Change | | _ | | - |
| Add | | | | |
| Remove | | | | |
| () (°) | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | • | |

| f amending or adding additional Arti Mach additional sheets, if necessary) | (Be specific) | |
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| ag | change, reclassification, or cancellation of issued shares, | |
| provisions for implementing the ame | endment if not contained in the amendment itself: | |
| (if not applicable, indicate N/A) | | |
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| The date of each amendment(s) add date this document was signed. | option://7//9 | , |
|--|--|---|
| Effective date if applicable: | • | |
| • | (no more than 90 days after amendment file de | ate) |
| Note: If the date inserted in this blo document's effective date on the Dep | ock does not meet the applicable statutory filing requirem artment of State's records. | ents, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were adop by the shareholders was/were suff | sted by the shareholders. The number of votes east for the a ficient for approval. | imendment(s) |
| | oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amenda | |
| "The number of votes east fo | or the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | sted by the board of directors without shareholder action and | d shareholder |
| The amendment(s) was/were adop action was not required. | sted by the incorporators without shareholder action and sha | areholder |
| Dated | 1/7/19 | |
| Signature | EFFINDS | ··· |
| selected, | ector, president or other officer if directors or officers have by an incorporator — if in the hands of a receiver, trustee, of fiduciary by that fiduciary) | |
| _ | ENTAGE Practu (Typed or printed name of person signing) | |
| _ | PRESIDENT | |
| | (Title of person signing) | |