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C. GOLDEN FEB 1 6 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CAPE CORAL GA	ARDEN CENTER INC	
DOCUMENT NUMB			
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ARTURO BELTRAN		
-		Name of Contact Per	son
-		Firm/ Company	
	PO BOX 443		
-		Address	
-	PINELAND, FL 33945	0: 40: 17: 0	
		City/ State and Zip C	ode
PALM	TREELANDSCAPING201	_	
	E-mail address: (to be us	sed for future annual repo	ort notification)
For further information	concerning this matter, pleas	se call:	
JOHN G ROPP		at () 242-1040
Name o	f Contact Person	Area	Code & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida De	epartment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ame Divi Clif	et Address endment Section ision of Corporations ton Building I Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CAPE CORAL GARDEN CENTER INC.

2018	15	ቦኒ፣	12.	1.5
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(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
P09000	00030067
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
BELTRAN'S NURSERY AND LANDSCAPING INC	The new
name must be distinguishable and contain the word "corpo "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviat	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 new registered agent and/or the new registered office ade	
Name of New Registered Agent	
(Flori	ida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A	Agent:
I hereby accept the appointment as registered agent. I am fam.	illiar with and accept the obligations of the position.
Signature of A	New Registered Agent, if changing
Signature of r	The registres rigers, y 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:	i, unu oui	omin, or as an riaa.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u></u>		
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)			
				
				
	· · · · · · · · · · · · · · · · · · ·			
				
				
			· -	
				
			-	
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification ndment if not contai	n, or cancellation of ned in the amendm	issued shares, ent itself:	
				

The date of each amendment(s) adoption:, if oth date this document was signed.	er 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, this date will not be lidecument's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
February 12, 2018	
Signature Artuno Boltrán	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Arturo Beltran	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_ -