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COVER LETTER

Division of Corporations NAME OF CORPORATION: GRACE MN LAWN SERVICE CORP DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JAIME SAGASTUME Contact Person Firm/ Company 405 W 76TH S Address HIALEAH, FL 33014 City/ State and Zip Code jorgemarlene@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 733 0561
Area Code & Daytime Telephone Number **JAIME** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Fiting Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 Incorporation FILED

GRACE MN LAWN SERVICE CORP (Name of Corporation as currently filed with the Florida Dept. of 8549: 25 P09000074041 (Document Number of Corporation (if known) AHAS 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: (City) 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 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.

Xample: X Change	PT	John Do	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>nes</u>	
<u>X</u> Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		<u>Name</u>	Address
1) Change	VP		MANUEL VILLANUEVA	409 EARNHARDT DR
Add				VENUS, FL 33960
X Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_	-	
Add				
Remove				

f aniending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	ne.
	
	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(ij not appreasie, mateure 1471)	

	01/23/2021	
The date of each amendment(s) a	doption:	, if other than t
date this document was signed.		
01/	23/2021	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirement epartment of State's records.	s, this date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	opted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amoutflicient for approval.	endment(s)
	proved by the shareholders through voting groups. The followin each voting group entitled to vote separately on the amendmen	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
	· · · · · · · · · · · · · · · · · · ·	
JAIME SAGASTUM	<u>,,</u>	
,	(voting group)	
select	lifector, president or other officer – if directors or officers have red, by an incorporator – if in the hands of a receiver, trustee, or outed fiduciary by that fiduciary)	
	JAIME SAGASTUME	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	