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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: HC LANDSCAPI	NG CORP.	
DOCUMENT NUMBI	CC9411414190		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	Humberto Quezada		
_		Name of Contact Persor	1
_		Firm/ Company	
	Address		
_		City/ State and Zip Code	e
For further information	E-mail address: (to be us	sed for future annual report	notification)
		at (⁷²⁷	
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rrtment of State:
\$35 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 Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

HC LANDSCAPING CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

CC8611514180

CC001151410	,0	
(Document)	nt Number of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this <i>Florida Profit Corp</i>	poration adopts the following amendment(s
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A profession	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	<u>RESS</u>)	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	"	
		
	<u></u>	
D. If amending the registered agent and/or registere	d office address in Florida, ent	ar the name of the
new registered agent and/or the new registered of		er the name of the
Name of New Projectioned Asset		
Name of New Registered Agent		
	(Florida street address)	
	(Piorita sireei adaress)	
New Registered Office Address:	(0):	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:	
I hereby accept the appointment as registered agent. I		obligations of the position.
Signat	ture of New Registered Agent, if o	changing F
3		S S
		83 7 2

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)

Remove

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: 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)	Title	Name	Address	
1) Change	VP	CELIA-HERNANDEZ	2236 GULF TO BAY BLVD	
Add			LOT 1133	
X Remove			Clearwater, FC	33
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				

765

C. If amend (Attach ad	ding or adding additional Articles, enter change additional sheets, if necessary). (Be specific)	ge(s) here:	
			_
provisio	nendment provides for an exchange, reclassific ions for implementing the amendment if not co		
(if)	not applicable, indicate N/A)	***	

· • •	11/2011	
The date of each amendment(s) adoption:	10/11/2016	, if other than the
date this document was signed.	, 1	
Effective date <u>if applicable</u> :	10/11/2016	
()	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not a document's effective date on the Department of Sta	meet the applicable statutory filing requirements ite's records.	, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
■ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app		ndment(s)
☐ The amendment(s) was/were approved by the sh must be separately provided for each voting gre	nareholders through voting groups. The following oup entitled to vote separately on the amendment	
"The number of votes cast for the amendment		
by(voting		
(voting	group)	
☐ The amendment(s) was/were adopted by the boa action was not required.		
☐ The amendment(s) was/were adopted by the incaction was not required.	orporators without shareholder action and shareho	older
10/11/2011 Dated		
Signature & H() mber	to Quezada	
(By a director, presider	nt or other officer – if directors or officers have no	
appointed fiduciary by	orator – if in the hands of a receiver, trustee, or of that fiduciary)	ner court
	HUMBERTO QUEZADA	
——————————————————————————————————————	ped or printed name of person signing)	
	President	
	(Title of person signing)	