

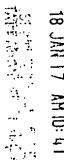
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Getseman	i Landsca	ping Services Corp
DOCUMENT NUMBER:	P1000007041	8	
The enclosed Articles of Amenda	nent and fee are submitted fo	or filing.	
Please return all correspondence (concerning this matter to the	following:	
	Jose A. Med Name tsemani Land	ling of Contact Person	
<u>(he</u>	tsemani land	dscaping S	ervices Corp
2311	SW 58 much	v-l	
 _	<u> </u>	Address	
<u>~~</u>	liami, Florida City/S	33155	5
	City/ S	tate and Zip Code	
E-mai	ll address: (to be used for futi g this matter, please call:	are annual report n	otification)
Jose A. Med	lina	at (305	2 Daytime Telephone Number
Name of Contact I	Person	Area Code	& Daytime Telephone Number
Enclosed is a check for the follow	ring amount made payable to	the Florida Depart	ment of State:
☑ \$35 Filing Fee □\$43 Cert	tificate of Status Certif	5 Filing Fee & ied Copy tional copy is sed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Division Clifton E 2661 Exc	ent Section of Corporations

Articles of Amendment to Articles of Incorporation

FILED

18 JAN 17 AM 10: 41

Getsemani Landsca			STAN TOTAL	
-	ation as currently filed wi	th the Flo	rida Dept. of State)	1 - Bartin
P 1 000 00 7041				
(Doc	cument Number of Corporat	ion (if kno	own)	
Pursuant to the provisions of section 607.1006. Florits Articles of Incorporation:	rida Statutes, this <i>Floridu P</i>	rofit Corp	oration adopts the follow	ring amendment(s)
A. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co- word "chartered," "professional association," or t	orp," "Inc," or "Co". A j			abbreviation
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE</u>)	<u>BOX</u>)			
D. If amending the registered agent and/or registered agent and/or the new register		orida, ente	er the name of the	
Name of New Registered Agent				
	(Florida street address	ij		
New Registered Office Address:			, Florida	
	(City)		(Zi	p Code)
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen		ecept the o	obligations of the position	ı.
Si	ignature of New Registered	Agent, if c	hanging	

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: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	7	Maria Elsidia Rubio	2311 SW 58 Avenue
X Add			Miami, Florida 33155
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			 -
Add			
Remove			
5) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	
	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(i mi of f man f min min min)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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 cast 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.	
Dated 01-08-2018	
Signature (By a director president or other officer – if directors or officers have not been	
(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 tiduciary by that fiduciary)	
Jose A. Medina	
(Typed or printed name of person signing)	
President (Title of person signing)	
(Title of person signing)	