## P120000022541

| (Re                     | equestor's Name)   |                 |
|-------------------------|--------------------|-----------------|
| (Ad                     | ldress)            |                 |
| (Ad                     | ldress)            |                 |
| (Cit                    | ty/State/Zip/Phone | <del>)</del> #) |
| PICK-UP                 | ☐ WAIT             | MAIL.           |
| (Bu                     | siness Entity Nan  | ne)             |
| (Do                     | ocument Number)    |                 |
| Certified Copies        | _ Certificates     | of Status       |
| Special Instructions to | Filing Officer:    |                 |
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Office Use Only



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Amend

MAR 1 4 2013

T. BROWN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO          | DRATION: BRENTWO   | OOD NURSERY  | III INC   |
|------------------------|--|--|---|
| DOCUMENT NUM           | D12000022E4  |  |   |
| The enclosed Article   | es of Amendment and fee are su   | bmitted for filing.  |   |
| Please return all core | respondence concerning this ma   | tter to the following:   |   |
|                        | Miguel Velazque:   | Z  |   |
|                        |  | Name of Contact Persor   | 1   |
|                        | 6832 NARCOOS   | Firm/ Company  |   |
|                        | ORLANDO FL 32  | Address  |   |
|                        | <u> </u>   | City/ State and Zip Code   | e   |
|                        | E-mail address: (to be us  | sed for future annual report                                       | notification)   |
| For further informati  | ion concerning this matter, pleas  | se call:   |   |
| Miguel Vela            | zquez  | at (407  | 947-6856  |
| Name of Contact Person |  | Area Co  | de & Daytime Telephone Number   |
| Enclosed is a check    | for the following amount made  | payable to the Florida Depa  | artment of State:   |
| S35 Filing Fee         | □S43.75 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)    |
| Ai<br>Di<br>P.         | ailing Address mendment Section (vision of Corporations O. Box 6327 allahassee, FL 32314 | Amend<br>Divisio<br>Clitton<br>2661 E                              | Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301 |

## Articles of Amendment to Articles of Incorporation of



## **BRENTWOOD NURSERY III INC**

| (Name of Corporation as currently  |                               | rida Dent. of State)          |   | •                 |
|--|-------------------------------|-------------------------------|---|-------------------|
| P12000022541   |                               |                               |   |                   |
| (Document Number   | of Corporation (if k          | known)                        |   |                   |
| Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation:  | rida Statutes, this <i>Fl</i> | orida Profit Corporation ac   | dopts the following                     | g amendment(s) to |
| A. If amending name, enter the new name of the   | corporation:                  |                               |   |                   |
|  |                               |                               |   | The new           |
| name must be distinguishable and contain the w<br>"Corp.," "Inc.," or Co.," or the designation "Co.<br>word "chartered," "professional association," or th | rp." "Inc," or "Co            | o". A professional corpora    | orated" or the al                       | obreviation       |
| B. Enter new principal office address, if applicat   | ble:                          |                               | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                   |
| (Principal office address <u>MUST BE A STREET AI</u>   | DDRESS )                      |                               |   |                   |
|  |                               |                               |   |                   |
|  |                               | -                             |   |                   |
| C. Enter new mailing address, if applicable:   |                               |                               |   |                   |
| (Mailing address <u>MAY BE A POST OFFICE B</u>   | <u>30X</u> )                  |                               |   |                   |
|  |                               |                               |   |                   |
|  |                               |                               |   |                   |
|  |                               |                               |   |                   |
| D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.                                     |                               | ss in Florida, enter the nan  | ne of the                               |                   |
| -  |                               |                               |   |                   |
| Name of New Registered Agent   | <del></del> -                 |                               |   |                   |
|  |                               |                               |   |                   |
|  | (Florida stree                | t address)                    |   |                   |
| New Registered Office Address:   |                               | Florida_                      | (Zip Code)                              |                   |
|  | (City)                        |                               | (Zip Code)                              |                   |
|  |                               |                               |   |                   |
| New Registered Agent's Signature, if changing R  | legistered Agent:             |                               |   |                   |
| hereby accept the appointment as registered agent  |                               | th and accept the obligation. | s of the position.                      |                   |
|  |                               |                               |   |                   |
| Signature of   | New Registered Ag             | ent, if 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: X Change          | <u> PT _ </u>      | lohn Doe         |                    |
|----------------------------|--------------------|------------------|--------------------|
| X Remove                   | <u>v</u> <u>N</u>  | Mike Jones       |                    |
| _X Add                     | <u>sv</u> <u>s</u> | Sally Smith      |                    |
| Type of Action (Check One) | <u>Title</u>       | <u>Name</u>      | <u>Addres</u> s    |
| 1) Change                  | S                  | Vicky McClure    | 6832 NARCOOSSEE RD |
| X Add                      |                    |                  | ORLANDO FL 32822   |
| Remove                     |                    |                  |                    |
| 2) X Change                | VPS                | Miguel Velazquez | 6832 NARCOOSSEE RD |
| Add                        |                    |                  | ORLANDO FL 32822   |
| Remove                     |                    |                  |                    |
| 3 ) Change                 |                    |                  |                    |
| Add                        |                    |                  |                    |
| Remove                     |                    |                  |                    |
| 4) Change                  |                    |                  |                    |
| Add                        |                    |                  |                    |
| Remove                     |                    |                  |                    |
| 5) Change                  |                    |                  |                    |
| Add                        |                    |                  |                    |
| Remove                     |                    |                  |                    |
| 6) Change                  |                    |                  |                    |
| Add                        |                    |                  |                    |
| Remove                     |                    |                  |                    |

|                                     | sheets, if necessary)                | . (Be specific                        | ')                                     |                                       |              |   |
|-------------------------------------|--------------------------------------|---------------------------------------|--|---------------------------------------|--------------|---|
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|                                     |                                      |                                       |  |                                       |              |   |
| an amendment                        | provides for an exc                  | change, reclass                       | ification, or ca                       | incellation of iss                    | sued shares, |   |
| rovisions for im<br>(if not applied | plementing the amable, indicate N/A) | <u>iendment if no</u>                 | t contained in                         | tne amendment                         | itself:      |   |
| ty not applied                      |                                      |                                       |  |                                       |              |   |
|                                     |                                      |                                       | <u> </u>                               |                                       |              |   |
|                                     |                                      |                                       |  |                                       |              |   |
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|                                     |                                      |                                       |  |                                       |              | _ |

| The date of each amendment(s                           | ) adoption: 03/07/2013  |
|--|---|
| Effective date if applicable:                          | 03/07/2013  |
|  | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                               | ( <u>CHECK ONE</u> )  |
| The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.   |
| The amendment(s) was/were must be separately provided  | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes of                                | ast for the amendment(s) was/were sufficient for approval   |
| hy   | (voting group)  |
|  | (voting group)  |
| action was not required.  The amendment(s) was/were:   | adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder  |
| action was not required.                               |   |
| Dated_03/0   | 7/2013  |
| Signature  |   |
| selec  | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary) |
|  | Miguel Velazquez  |
|  | (Typed or printed name of person signing)   |
|  | VPS   |
|  | (Title of person signing)   |