P12000022541

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2021 SEP 27 PH 3: 14

SECTIONARY OF STATE
TANK AND SECTION

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: BRENTWOOD N	NURSERY III INC.					
DOCUMENT NUMBER: P12000022541						
The enclosed Articles of Amendment and fee are su	ubmitted for filing.					
Please return all correspondence concerning this ma	atter to the following:					
Miguel Velazquez						
Name of Contact Person						
	Firm/ Company					
6832 NARCOOSSEE RD						
	Address					
Orlando FL 32822						
City/ State and Zip Code						
E-mail address: (to be us	ised for future annual report notification)					
For further information concerning this matter, plea	ase call;					
Miguel Velazquez	at (407) 913-6856					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made	payable to the Florida Department of State:					
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

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DRENT WOOD NORSER FITTING		
	on as currently filed with the Florida Dept. of State)	
P12000022541		
(Docume	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following	amendment(s
A. If amending name, enter the new name of the cor	rporation:	
name must be distinguishable and contain the word "cor" "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain	The new i "Corp.," the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI		 -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent	ed office address in Florida, enter the name of the	2021 SEP 27 PH 3: 14
	(Florida street address)	
New Registered Office Address:	Florida	
	(City) (Zip Co	de)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agent: I am familiar with and accept the obligations of the position.	
Signati	ture 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.

Example:

X Change	$\overline{\text{b.t.}}$	<u>John D</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	V		BRENDA LEE VELAZQUEZ	6832 NARCOOSSEE RD
Add				ORLANDO FL 32822
X Remove				
2) Change	VP	_	LILIBETH VELAZQUEZ	6832 NARCOOSSEE RD
X Add				ORLANDO F1. 32822
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

f amending or adding a Attach <i>additional sheets</i> ,	if necessary).	(Be specific)			
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an amendment provide	es for an exchar	nge, reclassification	on, or cancellation	n of issued share	<u>s,</u>
rovisions for implement (if not applicable, inc	<u>nung the amend</u> dicase MAO	<u>Iment it not conta</u>	ined in the amen	<u>dment itself:</u>	
(у им аррисане, ин	Metale (WA)				
					
					

	09/22/2021	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	VID 4 (5 to 5	
O ^t Effective date <u>if applicable:</u>	//22/2021	
	(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for t sufficient for approval.	he amendment(s)
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The for or each voting group entitled to vote separately on the ame	ollowing statement ndment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
09/22/20 Dated Signature	Man Deliguez	
selec	director, president or other officer – if directors or officers ted, by an incorporator – if in the hands of a receiver, trustented fiduciary by that fiduciary)	have not been se, or other court
	Miguel Velazquez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	