P12000056507

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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07/09/12--01012--008 **35.00



Amend

JUL 1 0 2012 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HERNANDEZ & RODRIGUEZ NURSERY INC				
DOCUMENT NUMI	BER: P1200005650	7		
The enclosed Articles	of Amendment and fee are sul	omitted fo	or filing.	
Please return all corre	spondence concerning this mat	ter to the	following:	
	MAGDALENO RO	ODRIG	GUEZ CRU	JZ
		Name	of Contact Person	
		Fi	rm/ Company	
	841 SW 7 PLACE			
			Address	
	FLORIDA CITY, FLORIDA 33034			
		City/ S	tate and Zip Code	;
LU	ISITASOTOLONG	O@Y	AHOO.CC	DM
	E-mail address: (to be us	_		
For further information	n concerning this matter, pleas	e call:		
MAGDALEN	O RODRIGUEZ R	UZ	_at (<u>786</u>	897-7406
Name	of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to	the Florida Depa	rtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certi	75 Filing Fee & fied Copy itional copy is osed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314		Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle issee, FL 32301

New address Only

Articles of Amendment to Articles of Incorporation of



to

HERNANDEZ & RODRIGUEZ NURSERY INC

(Name of Corporation as of	currently filed with the Flo	rida Dept. of State)	· · · · · · · · · · · · · · · · · · ·	
P12000056507				
(Document	Number of Corporation (if k	nown)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Fl	orida Profit Corporation ad	opts the following ame	endment(s)
A. If amending name, enter the new nam	ne of the corporation:			
N/A			The	new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	ition "Corp," "Inc," or "Co	o". A professional corpora		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		841 SW 7 PLACE		
		FLORIDA CITY FL 33034		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		841 SW 7 PLACE		
		FLORIDA CITY FL 33034		
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent		ss in Florida, enter the nam	e of the	
	841 SW 7 PLAC			
•	(Florida stree			
New Registered Office Address:	FLORIDA CITY	, Florida	33034	
	(City)		(Zip Code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe Signature.	anging Registered Agent: red agent. I am familiar wi nature of New Registered Ag		s of the position.	

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 <math>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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	' Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			N/A
2) Change Add Remove			N/A
3.) Change Add Remove			N/A
4) Change Add Remove			N/A
5) Change Add Remove			N/A
6) Change Add Remove			N/A

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
CHANGE OF ADDRESS ONLY		
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A		

The date of each amendment(s) adoption: U//U6/2U12		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
☐ The amendment(s) was/were accurate a	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were accaction was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated 07/06	12012	
Signature X		
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
	nted fiduciary by that fiduciary)	
	MAGDALENO RODRIGUEZ CRUZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	