

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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'i'o:

Division of Corporations Fax Number : (850)61 : (850)617-6380

From:

: DBS DIEZ BUSINESS SERVICES INC

Account Name : DBS DIEZ BUST Account Number : 120170000036 Phon**e** : (813)871-1816 Fax Number : (813)884-5920

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN

E&C LANDSCAPING SERVICES CORP

Certificate of Status	0
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T. LEMIEUX

COVER LETTER

TO: Amendment Scation Division of Corpo				
NAME OF CORPOR	ATION: E&C LANDS	APING SERVICES CORP		
DOCUMENT NUMB	ER: P12000067555			
	of Amendment and fee are	Submitted for filing.		
Please return all corresp	pondence concerning this	matter to the following:		
	ANGEL J DIEZ			
-		Name of Contact Person		
_	DBS DIEZ BUSINESS S	ERVICES INC		
	4125 W WATERS AVE	Firm/ Company		
- -	TAMPA, FL 33614	Address		
-		City/ State and Zip Code		
FUEN	TESESTRELLAI@LIV	ECOM	•	
		ejused for future annual report notification	ວເາ)	
		·		
For further information	concerning this matter, p	lense call:		
ANGEL DIEZ		at (<mark>813) 871-</mark> 1	816	
Name o	l'Contact Person	Area Code & Day	time Telephone Number	
Enclosed is a check for	the following amount ma	de payable to the Florida Department of	State:	
_	_			
\$35 Filing Fee	☐\$43.75 Filing Fee Certificate of Statu		50 Filing Fee ficate of Status	
	Certificate of State		fied Copy	
	ŀ		itional Copy	
		is on	closed)	
Moil	ing Address	Street Address		
	ndment Section	Amendment Section		
Divis	tion of Corporations	Division of Corporations		
	Box 6327	Clifton Building		
Talla	hassee, FL 32314	2661 Executive Center Circle Tallahassee, Ft 32301		
	·	rananassee, FC.)2J01	

Articles of Amendment to Articles of Incorporation of

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E&C LANDSCAPING SERVICES COR	₹P		
(Name	of Cornoration as current	tly filed with the Florida Dec	ot, of State)
P12000067555			
	(Document Number of	of Corporation (if known)	
Durant to the manifeless of species 607	1004 Clarida Statutan dhia	Clusida Usofia Cassanssian s	donte the following amondment with
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Pibrida Statutes, mis	r tortaa rroja Corporanon e	dobiz the following amendmeni(s) to
·			
A. If amending name, enter the new no	ime of the corporation:		
BRANDON SOD CORP	<u> </u>	_,	The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corpor	orated" or the abbreviation attention rame must contain the
• •	111	827 S KINGS AVE	
B. Enter new principal office address, (Principal office address MUST BE A S	<u>if applicable:</u> TREETADDRESS)	DD ANDON EL 22511	
		BRANDON, FL 33511	
	K i		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST-		827 S KINGS AVE	
(attaining address) interest interest to the		BRANDON, FL 33511	
	1	l to The date of the angle	
D. If amending the registered agent an new registered agent and/or the new			me ot the
		<u>-</u>	
Name of New Registered Agent			···
•	827 SKINGS AVE		
		reet address)	
New Registered Office Address:	BRANDON		Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if e I hereby accept the appointment as registe	hanging Registered Agen tered åvent. I am fomiliar	<u>t:</u> with and accept the obligation	ns of the position
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Si N
		West.	
		,	<u> </u>
	Signotire of New	Registered Agent, if changing	
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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 = Treasure; 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 officer.

held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Mike Jones, v as Remove	2, ana 5ai	iy siiiiii, ar as	in Add.	
Example: X Change	Tq	John Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nan</u>	# Ge 	<u>Addres</u> s
1) X Change	P	ES.	FRELLA D FUENTES	827 S KINGS AVE
Add				BRANDON, FL 33511
2) X Change	VP	CA	rlos hernandez	827 S KINGS AVE
Add				BRANDON, FL 33511
Remove				
3) Change		<u> </u>		
Remove				
4) Change Add			#	
Remove				
5) Change				
Add		į		
Remove				
ර) Change		<u>_ </u>		
Add				
Remove		j		

Page 2 of 4

6. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Bespecific)	
10	
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)	
#13	

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P 6/6

The state of walk as a second	11 /2)/2017 doction:		if other than the
The date of each amendment(s) a date this document was signed.	uopaon:		, if other than the
· · · · · · · · · · · · · · · · · · ·	21/2017		
Effective date if applicable:	2172017		
Effective date was a supplication	(no more ti	than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De		applicable statutory filing requirements, thereby, applicable statutory filing requirements, the rds.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE))	
The amendment(s) was/were ad- by the shareholders was/were sa		s. The number of votes cast for the amendir	nent(s)
☐ The amendment(s) was/were ap	proved by the shareholder each voting Four entitle	ers through voting groups. The following sto led to vote separately on the amendment(s):	denieni
"The number of votes cast	for the amendment(s) wa	as/were sufficient for approval	
by	<u>U}</u>	<u> </u>	
	(vot ing group)		
The amendment(s) was/were ad- action was not required.	opted by the board of dire	ectors without shareholder action and sharel	holder
The amendment(s) was/were ad- action was not required.	opted by the incorporators	rs without shareholder action and shareholde	er
11/21/201	7		
Dated		<u> </u>	
	No.		
Signature	A STATE OF THE PARTY OF THE PAR		
	director, president or other	er officer - if directors or officers have not b	occn
selecte	d, by an incomporator – if	f in the hands of a receiver, trustee, or other	court
appoir	ited fiduciary by that fiducial	iciary)	
	CARLOS HERNANDE	EZ	
	(Typed or pri	inted name of person signing)	
	VICE PRESIDENT		
		Title of person signing)	