P130000 32122

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MIGUELS LANDS	SCAPING SERVICES IN	IC .
DOCUMENT NUMBER: P13000032122		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this man	tter to the following:	
MIGUEL DE MIGUEL JOS	E	
	Name of Contact Person	1)
MIGUELS LANDSCAPING	SERVICES INC	
858 Pipers Ca	Firm/ Company Dr.	
858 Pipers Ca West Palm Beach	h F 33415	
	City/ State and Zip Cod	c
1-505a @ 60115	ton Africa	
	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
MIGUEL DE MIGUEL JOSE	561	294-4258
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 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	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

MIGUELS LANDSCAPING SERVICES INC

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P13000032122	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
N/A	Tt.,
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", / "chartered," "professional association," or the abbreviation "P.A."	1 professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRESS</u>)	2
2. Enter new mailing address, if applicable:	1
(Mailing address MAY BE A POST OFFICE BOX)	· ·
	36
	·
 If amending the registered agent and/or registered office add 	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	<u> </u>
Name of New Registered Agent NA	
(Florida str	eet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar v	in the second of
nerety accept the appointment as registered agent. I am janutual v	vun ana accept the ortigations of the position.
Signature of New Ro	egistered Agent, if changing
Theck 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:

<u>X</u> Change	<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	VP	JESSICA ALFARO	105 S ATLANTIC DRIVE W
Add			BOYNTON BEACH FL 33425
X Remove			<u> </u>
2) Change	···		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

114	ets, if necessary).	(ne specijie)			
 					
					
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an amendment proprovisions for imple	ovides for an exch	nange, reclassifica	ation, or cancellation	on of issued shares,	
(if not applicable	e, indicate N/A)	nament ii not coi	intamed in the anie	nament usen:	
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The date of each			G 30	20		·	if other than the
date this docume Effective date <u>if</u>	_	ماء	<u>ر</u> ک)			
		•		e than 90 days a,			
Note: If the dat document's effection	e inserted in ctive date on	this block does to the Department o	not meet the of State's rec	e applicable sta cords.	tutory filing req	uirements, this dat	te will not be listed as the
Adoption of Am	nendment(s)	(<u>C</u> I	HECK ON	<u>E</u>)			
The amendme action was no	ent(s) was/w et required.	ere adopted by the	e incorporat	tors, or board of	directors withou	it shareholder actic	on and shareholder
		ere adopted by the were sufficient for		ers. The number	of votes cast fo	or the amendment(s	;)
☐ The amendme must be sepa	ent(s) was/w rately provid	ere approved by the ded for each voting	he sharehold g g <i>roup ent</i>	ders through vot itled to vote sep	ing groups. The arately on the ar	following stateme nendment(s);	nl
"The nu	imber of vot	es cast for the ame	endment(s)	was/were suffic	ient for approval	1	
by			=				
		(vo	ting group)	1			
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	Dated	0/20/6				(
	Signature _	Misur	7	MiCit	400	1	
	(By a director, pres	sident or oth	her officer – if d	rectors or office	ers have not been	<u> </u>
	`` *	selected, by an inc appointed fiduciar	orporator = y by that fic	or in the hands (duciary)	of a receiver, fru	stee, or other court	
		1	ti ave	1 Do	Migel	Jose	
			(Typed or p	printed name of	person signing)		
			Kezd	dent			
		· 	(Title of pe	rson signing)			