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P130000	37702
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(City/State/Zip/Phone #)	11/18/2001007003 **35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	S TAULENTI JAN 0 5 2020
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _____

DOCUMENT NUMBER: P13000037702

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS H. GONZALEZ

Name of Contact Person

SHADEHOUSES BY C.H.G INC

Firm/ Company

16700 SW 277TH ST

Address

HOMESTEAD, FL33031

City/ State and Zip Code

PATTYSACCTAX@LIVE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 CARLOS H. GONZALEZ
 at (
 786
)
 712-1778

 Name of Contact Person
 at (
 Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🔳 \$35 Filing Fee

S43.75 Filing Fee & Certificate of Status Statistical States (Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certifical Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SHADEHOUSES BY C.H.G INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P13000037702

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "lnc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

. Enter new principal office address, if applic			
Principal office address <u>MUST BE A STREET</u>	<u>ADDRESS</u>)		1018 10 V
			.2
-			8
<u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>	E BOX)		MALL
		. <u> </u>	
		,	ن ـــ ـ
<u>If amending the registered agent and/or reg</u> new registered agent and/or the new registered <u>Name of New Registered Agent</u>	red office address:	er the name of the	_
	(Florida street address)		
<u>New Registered Office Address:</u>		, Florida	
	(C/ŋ;)	(Zip	Code)

New Registered Agent's Signature, if changing Registered Agent:

1 hereby accept the appointment as registered agent. 1 am familiar with and accept the obligations of the position.

Signature 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

PT John Doe

<u>X</u> Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Address</u>
1) Change	S	MARIO ESTEBAN URDINOLA	16700 SW 277TH ST
Add		CASTELLANOS	HOMESTEAD, FL 33031
X Remove			
2) Change			
Add			
Remove			
Add			
Remove			·····
4) Change			<u></u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	<u>.</u>		
Add			
Remove			

If amending or	adding additional Arti	cles, enter change(s	<u>) here</u> :		
(Attach additiona	d sheets, if necessary).	(Be specific)			
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	·				
<u>If an amendmer</u>	<u>nt provides for an exch</u>	ange, reclassification	on, or cancellation o	<u>f issued shares.</u>	
provisions for	implementing the ame icable, indicate N/A)	ndment if not conta	ined in the amendn	ient itself:	
(у погаррі	icable, indicale N/A)				
		<u> </u>			
·		·····		·· ·· ··	
	· · · · ·				

The date of each amendment(s) adoption: date this document was signed.

• . • .

Effective date if applicable:

(no more than 90 days after amendment file date)

______, if other than the

••

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

	(voting group)
Dete	OCTOBER 29, 2020
Dated Signa	
•	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	CARLOS H. GONZALEZ
	(Typed or printed name of person signing)
	PRESIDENT

(Title of person signing)