

(Re	questor's Name)	
(Äd	dress)	
(Ad	dress)	<u></u>
(Cit	ry/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
· (Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200314939252

06/27/18--01019--027 ++35.00

Amel

R. WHITE JUN 2 9 2018

FILED
18 JUN 27 M 8: 58

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION:	ALL LANDS	SCAPE DATA IN	'C			
DOCUMENT NUMBER:	P13000044460					
The enclosed Articles of Amend	ment and fee are su	ubmitted for filing				
Please return all correspondence	concerning this ma	atter to the followi	ng:			
		Jorge Var	ela			
		Name of Cont	act Persor	1		
		ALL LANDSCA	PE DATA	INC		
		Firm/ Co	mpany			
	9737 NW 41 Street, Suite 919					
	Address					
	Doral, FL 33178					
		City/ State and	d Zip Cod	e		
	٨	Mdasilva@allland	scapedata	.com		
E-ma	il address: (to be u	_	-			
			·			
For further information concerni	ng this matter, plea	se call:				
Jorge Varela		at (954	261-9562 de & Daytime Telephone Number		
Name of Contact	Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for the follow	wing amount made	payable to the Flo	orida Depa	artment of State:		
_	3.75 Filing Fee & rtificate of Status	□\$43.75 Filin Certified Co (Additional c enclosed)	- py	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>Mailing Addr</u>				Address		
Amendment So				ment Section		
Division of Co P.O. Box 6327		Division of Corporations Clifton Building				
Tallahassee, F.			xecutive Center Circle			

Tallahassee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation of

18 JUH 27 AM 8: 58

SENERA TA BIATE IAUNATO SELITORA

ALL LANDSCAPE DATA INC

AL	L LANDSCALE DATA INC		*****
(Name of Corpor	ation as currently filed with th	e Florida Dept. of State)	
	P13000044460		
(Doc	cument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this Florida Profit	Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A profes		
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A			
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE I	<u>BOX</u>)		
		-	
D. If amending the registered agent and/or regis	stered office address in Florida	, enter the name of the	
new registered agent and/or the new registere			
Name of New Registered Agent			
	(Florida street oddress)		
New Registered Office Address:		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		t the obligations of the pos	iltion.
2 7 17 3	·		
			
Si	ianatura of Nove Ragistarud Agan	et it changing	

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		Derick, Langel	9737 NW 41 Street, Suite 919
Add				Doral, FL 33178
X Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here (Be specific)		
		<u> </u>	
		<u> </u>	
		<u> </u>	
			_
-			
		·- <u>-</u>	
<u>-</u>			
			
an amendment provides for an exch	ange, reclassification, or	cancellation of issue	d shares,
provisions for implementing the ame (if not applicable, indicate N/A)	idment if not contained i	n the amendment its	elf:
			_

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(n	o more than 90 days after amendment file date)
Note: If the date inserted in this block does not n document's effective date on the Department of States	neet the applicable statutory filing requirements, this date will not be listed as the e's records.
Adoption of Amendment(s) (CHEC	K ONE)
The amendment(s) was/were adopted by the shar by the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for approximately the shareholders.	eholders. The number of votes cast for the amendment(s) oval.
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting gro	areholders through voting groups. The following statement up entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment	ent(s) was/were sufficient for approval
by(voting	
(voting	group)
☐ The amendment(s) was/were adopted by the boar action was not required.	d of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the inco- action was not required.	rporators without shareholder action and shareholder
Dated 6 Z6	18
Signature	Inge Varda
` ,	or other officer – if directors or officers have not been
selected, by an incorpo appointed fiduciary by	rator – if in the hands of a receiver, trustee, or other court that fiduciary)
•••	ed or printed name of person signing)
(Тур	ed or printed name of person signing)
	Fresident
	(Title of person signing)