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## COVER LETTER

**:**•

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: _	ALL NATE	RAL LAWN MA	AIN LENAI	NCE CORP.		
DOCUMENT NUMBER:	BER:P13000071676					
The enclosed Articles of Amendm	ent and fee are su	ibmitted for filing	<u>.</u>			
Please return all correspondence c	oncerning this ma	itter to the follow	ing:			
		CINDY A	GUILAR			
Name of Contact Person						
		TOYOS TAX	SERVICE	INC.		
<del></del>	<del> </del>	Firm/ Co	mpany			
		7264 SW 8TH	H STREE	Т		
		Addr	ess			
	MIAMI, FL 33144					
		City/ State an	d Zip Cod	e		
For further information concerning	g this matter, plea		786	536-4647		
Name of Contact Person		at (	786 Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following	ng amount made	payable to the Flo				
	75 Filing Fee & ficate of Status	S43.75 Filin Certified Co (Additional of enclosed)	ру	☐\$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 Division Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

## ALL NATURAL LAWN MAINTENANCE CORP

(Name of Corporation as currently	y filed with the Florida Dept. of State)
P130000716	76
(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(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
	<b>= = = = = = = = = = = = = = = = = = = </b>
C. Enter new mailing address, if applicable:	三 香 田
(Mailing address MAY BE A POST OFFICE BOX)	
	2. 2 円 
D. 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	
(Florida sti	cet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent. I am familiar	
Signature of New k	Registered Agent, if 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	PT John	Doc	
X Remove	<u>V</u> <u>Mike</u>	<u>e Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>r Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	SEC	MARIA GOMEZ	16710 SW 300 STREET
Add			HOMESTEAD, FL 33030
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Article (Attach additional sheets, if necessary).	
If an amendment marridge for an array	hanna malanifartian urus sallatian of issued above
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>

The date of each amendment(s) ac date this document was signed.	option:	, if other than the
Effective date if applicable:		
Enecuve date ir applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendme fficient for approval.	m(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	10/27/2017	
Signature		
(By a d selecte	irector, president or other officer – if directors or officers have not be d, by an incorporator – if in the hands of a receiver, trustee, or other cled fiduciary by that fiduciary)	
	RAYMUNDO G GOMEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	