## P14000019310

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Amend 107.9.14

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Division of Corporations				
APING INC.				
or filing.				
following:				
YVETTE RASHID				
of Contact Person				
UNIVERSAL ACCOUNTING				
• •				
2787 E OAKLAND PARK BLVD STE 204				
Address				
<del></del>				
tate and Zip Code				
	MC			
ure annual report notification)				
<sub>at</sub> 954 728-898	2			
Area Code & Daytime Telep	hone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
fied Copy Certificate of St itional copy is Certified Copy	atus			
Street Address				
	PARK BLVD STE 2  Address LE, FL 33306  State and Zip Code  OUNTINGFINANCIAL.CO ture annual report notification)  at (954 ) 728-898  Area Code & Daytime Teleptor the Florida Department of State:  75 Filing Fee & Certificate of Statistical Copy (Additional Copy is enclosed)			

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation** of

## FFM LANDSCAPING INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P1/000010310

(Document Number	of Corporation (if know	n)	
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this Florida	a Profit Corporation adopts the follow	ring amendment(s)
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 "Coword "chartered," "professional association," or t	orp," "Inc," or "Co".	company," or "incorporated" or the A professional corporation name mus	abbreviation st contain the
B. Enter new principal office address, if applica	ble:		
(Principal office address MUST BE A STREET A			
			<del></del> -
	_		
C. Enter new mailing address, if applicable:		,	
(Mailing address <u>MAY BE A POST OFFICE A</u>	<u>BOX</u> )		
			مة <b>د</b> س <b>س</b>
D. If amending the registered agent and/or regis	stered office address in	Florida enter the name of the	14 JUH 23 PM 12: 05
new registered agent and/or the new register		Tiorian enter the name of the	三年 海
Name of New Registered Agent			- 13 gi
<del></del>	(Florida street add	lress)	75.
New Registered Office Address:		, Florida	
TVEN ACCISIONED OFFICE MAINESS.	(City)	(Zip Code)	<del></del>
N- P-14-14 (1961)			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		nd accept the obligations of the position	7.
•		· · · · ·	
Signature of	New 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	<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	Р	Fransisco Fransisco Matias	2787 E Oakland Park Blvd
Add			Suite 204
Remove			Fort Lauderdale, FL33306
2) Change	Р	Francisco Francisco Matias	2787 E Oakland Park Blvd
Add			Suite 204
Remove			Fort Lauderdale, FL 33306
3) Change	<del></del>		
Add		·	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

L. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)				
Amending office's name - mistake on original articles				
	,			
TO THE STATE OF TH				
If an amendment provides for an exchange, reclassification, or cancellation of iss provisions for implementing the amendment if not contained in the amendment	itself:			
(if not applicable, indicate N/A)				

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	-
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 06/18/2014	
Signature hell fashed	
(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)	
Yvette Rashid	
(Typed or printed name of person signing)	<del></del>
Incorporator	
(Title of person signing)	