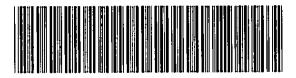
P1500000 5008

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Turf Solutions of Florida, Inc DOCUMENT NUMBER: P15000005008 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Nathan Florian Name of Contact Person Turf Solutions of Florida, Inc. Firm/ Company 2494 S Coleman Ave Address Homosassa, FL 34448 City/ State and Zip Code nathanflorian26@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nathan Florian Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations**

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

| Turf Solutions of Florida, Inc | | |
|---|--|---------------------------------------|
| (Name of Corpor | ration as currently filed with the Florida Dept. of State) | |
| P15000005008 | | |
| (Doc | cument Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation: | rida Statutes, this Florida Profit Corporation adopts the follow | ving amendment(s) to |
| A. If amending name, enter the new name of the | e corporation: | |
| | | The new |
| | "corporation," "company," or "incorporated" or the abbrevionc," or "Co". A professional corporation name must conbreviation "P.A." | |
| B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u> | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE). | <u>BOX</u>) | · · · · · · · · · · · · · · · · · · · |
| | | |
| D. If amending the registered agent and/or registered agent and/or the new registered. | stered office address in Florida, enter the name of the ed office address: | ~ |
| Name of New Registered Agent | | <u> </u> |
| | | |
| | (Florida street address) | |
| New Registered Office Address: | , Florida | <u> </u> |
| | (City) (Z. | ip Code) = |
| New Registered Agent's Signature, if changing R | Registered Agent: | 9 |
| i hereby accept the appointment as registered agen | t. I am familiar with and accept the obligations of the position | n. |
| Sis | gnature 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 | $\underline{\mathbf{V}}$ | 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) X Change | P | Nathan Florian | 2494 S Coleman Ave |
| Add | | | Homosassa, FL 34448 |
| Remove | | | |
| 2) Change | P | Mandy Florian | 2494 S Coleman Ave |
| Add | | | Homosassa, FL 34448 |
| X Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |
| | | Page 2 of 4 | |
| E. <u>If amending or additional she</u> | ng additi ets. if ned | onal Articles, enter change(s) here: cessary). (Be specific) | |

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| F. If an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amendment if not contained in the amendment if not applicable, indicate N/A) N/A | on of issued shares, andment itself: |
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| Page 3 of 4 | |
| i age 5 VI 4 | |
| 1/1/2020 | |
| The date of each amendment(s) adoption: 1/1/2020 | , if other than the |
| date this document was signed. | |
| Effective date if applicable: | |
| · · · · · · · · · · · · · · · · · · · | endment file date) |

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) | (<u>CHECK ONE</u>) |
|---|--|
| ■ The amendment(s) was/were adopted by the shareholders was/were suffice. | ed by the shareholders. The number of votes cast for the amendment(s) cient for approval. |
| | wed by the shareholders through voting groups. The following statement ch 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 adopte action was not required. | ed by the board of directors without shareholder action and shareholder |
| The amendment(s) was/were adopte action was not required. | ed by the incorporators without shareholder action and shareholder |
| Dated | |
| Signature | |
| selected, b | etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary) |
| Na | than Florian |
| | (Typed or printed name of person signing) |
| Pre | esident |
| (Ti | tle of person signing) |