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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Eagle Isl	land Grove, Inc.			
DOCUMENT NUMBI	P150	000028540			
The enclosed Articles of	f Amendment and fee are s	submitted for filing.			
Please return all corresp	oundence concerning this m	natter to the following:			
٦	ravis R. Williamson				
_		Name of Contact Person			
Í	Eagle Island Grove, Inc.				
_		Firm/ Company			
2	242 SW 5th Street				
_	Address				
ŀ	Pompano Beach, FL 33060				
_		City/ State and Zip Code			
		travis.williamson@brind.us			
	E-mail address: (to be	used for future annual report notification)			
For further information	concerning this matter, ple	rase call:			
Travis Williamson		at ()			
Name of	f Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	e payable to the Florida Department of State:			
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address		Street Address			
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327		Clifton Building			
Talla	hassee. FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

	Eagle Island Grove, Inc.	2914 1117 1 1 2: ls 8
(Name of Cor	poration as currently filed with the Flor	
	P15000028540	
1	(Document Number of Corporation (if known	wn)
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corpo	oration adopts the following amendment(s) to
A. If amending name, enter the new name o	f the corporation:	
Palm Beach Ornamentals, Inc.		The new
name must be distinguishable and contain t "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co". A professiona	"incorporated" or the abbreviation of corporation name must contain the
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		
D. If amending the registered agent and/or new registered agent and/or the new reg		r the name of the
Name of New Registered Agent		<u> </u>
	(Florida street address)	
New Registered Office Address:		, Florida
THE MEGANICA OFFICE AND SEE	(City)	(Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	ing Registered Agent: agent. I am familiar with and accept the e	obligations of the position.
	Signature of New Registered Agent, if c	hanging

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				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>			<u>Addres</u> s	
1) Change	 -					
Add						
Remove						
2) Change						
Add						
Remove						
3) Change	•		····			
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change		<u> </u>				
Add						
Remove						

If amending or adding additional Arti (Attach additional sheets, if necessary).	cies, enter change(s) here (Be specific)	;	
		.	
			<u> </u>
-			
	_		
<u> </u>			
·			
If an amendment provides for an exch	ange, reclassification, or	cancellation of issued share:	5.
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained i	n the amendment itself:	_
			, <u>-</u> , -
	1,00		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	Immediately upon filing and acceptance.	
once it apprende	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date we Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re-sufficient for approval.	
	approved by the shareholders through voting groups. The following statement 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)	
action was not required.	adopted by the board of directors without shareholder action and shareholder	
action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	Jenus Muller Whee	
(B)	a director, president of other officer - it directors or officers have not been	
	ected, by an incorporator - if in the bands of a receiver, trustee, or other court	
apı	pointed fiduciary by that fiduciary	
	Travis R. Williamson	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of nerson signing)	