## P15000035848

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: HERNANDEZ PLA	ANTS INC	
	BER: P15000035848		****
	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	iter to the following:	
	ERIKS MELENDREZ ZELA	.DA	
		Name of Contact Perso	n
	HERNANDEZ PLANTS INC		
		Firm/ Company	
	19780 SW 177TH AVE LOT	<b>#206</b>	
		Address	
	MIAMI, FLORIDA 33187		
		City/ State and Zip Cod	e
	E-mail addrose: (t.) bo ne	ed for future annual report	natification
	rman address, (to be us	ed to the lattic amidal report	Mandadon
For further information	on concerning this matter, pleas	e call:	
ERIKS MELENDRI	7 7FLADA	305	684-4037
	of Contact Person	at ( 305	) de & Daytime Telephone Number
Name	of Contact Ferson	Alea Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made p	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of	Corporation as currentl	y filed with the Florida	Dept. of State)	
215000035848				
	(Document Number of	f Corporation (if known	)	
tursuant to the provisions of section 607.10 s. Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporat	tion adopts the following amendm	ent(s) to
A. If amending name, enter the new nam	ne of the corporation:			
NA .			The nev	
ame must be distinguishable and contain the Inc.," or Co.," or the designation "Co Chartered," "professional association," o	rp," "Inc," or "Co" 2	4 professional corporat	ated" or the abbreviation "Corp., tion name must contain the work	 d
3. Enter new principal office address, if	annlicable:	NA		
Principal office address MUST BE A ST	REET ADDRESS )			
C. Enter new mailing address, if application (Mailing address MAY BE A POST O	able: FFICE BOX)	NA		
		-		
				ē.
). If amending the registered agent and	or registered office add	ress in Florida, enter t	he name of the	.' د
new registered agent and/or the new	<del>registerea office address</del> ERICKS MELENDREZ Z			
Name of New Registered Agent	ERICKS MELIENDRES. 2	CISIONION		1.
				- ` 
	,	reet address)		<u>-</u> .
New Registered Office Address:	16550 SW 216TH ST MI	AMI FLORIDA	, Florida 33170	S S
		(City)	(Zip Code)	غ

YEYIKS MCIPM (IXPL Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	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	VP	OLDIN HERNANDEZ MELENDRI	16550 SW 216TH ST
Add			MIAMI FLORIDA 33170
Remove			
2) Change	PRES	ERIKS MELENDREZ ZELADA	16550 SW 216TH ST
X Add			MIAMI FLORIDA 33170
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			·
Add			······································
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
A	
	<del></del>
<del>-</del>	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	<del>.</del>
(if not applicable, indicate N/A)	
<u> </u>	
	- 1

The date of each amendment(s) late this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes car	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
10/27/200 Dated	223	
Signature	Friks Melubez	
select	director, president or other officer – if directors or officers have not been led, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	ERIKS MELENDREZ ZELADA	3
	(Typed or printed name of person signing)	
	PRESIDENT	<u></u>
	(Title of person signing)	<del></del>
		=
		C)