| (R | equestor's Name) | | | | |
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| (A | ddress) | | | | |
| (A | ddress) | | | | |
| (C | ity/State/Zip/Phone #) | | | | |
| PICK-UP | WAIT MAIL | | | | |
| (B | usiness Entity Name) | | | | |
| (Document Number) | | | | | |
| Certified Copies | Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | | |
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C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Green Masters of Central Florida Inc | | | | | | | |
|--|--|--|--|--|--|--|--|
| DOCUMENT NUMBER: | | | | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | | |
| Reginald A. Williams | | | | | | | |
| Name of Contact Person | | | | | | | |
| Reginald A. Williams Name of Contact Person Green Masters of Central Florida Inc. Firm/Company | | | | | | | |
| Firm/ Company | | | | | | | |
| 2021 Jones Avenue | | | | | | | |
| Address | | | | | | | |
| Address Sanford, Florida 32771 City/ State and Zip Code | | | | | | | |
| City/ State and Zip Code | | | | | | | |
| Greenmasters 1981@ grail.com | | | | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | | | |
| For further information concerning this matter, please call: | | | | | | | |
| Reginald Uilliams at 407 936-5412 Name of Contact Person Area Code & Daytime Telephone Number | | | | | | | |
| Name of Contact Person Area Code & Daytime Telephone Number | | | | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | | | | |
| \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed) | | | | | | | |
| Mailing Address Amendment Section Street Address Amendment Section | | | | | | | |

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

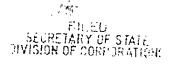
Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment Articles of Incorporation



Green Masters of Central Florida Inc

2016 AUG 25 AM 9: 13

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

icles of

| P150000 38665 | |
|--|---|
| (Document Number of Corporation | (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Incorporation: | is corporation adopts the following amendment(s) to its Art |
| A. If amending name, enter the new name of the corporation: | |
| name must be distinguishable and contain the word "corporation "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>) | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| | · |
| D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address | dress in Florida, enter the name of the |
| Name of New Registered Agent | |
| (Florida . | street address) |
| New Registered Office Address: | , Florida |
| (Cit | y) (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar | it: with and accept the obligations of the position. |
| 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 <math>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> | Name | Address |
| 1) Change | P | Reginald A. Williams | Sunford, Fl 32771 |
| Add | | | Sanford, Fl 32771 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | <u> </u> |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| 1 | Nee | 9 | to | add | my | Name | On as | officer | In |
|------|-----------|----------|--------|---------------|----------|-----------|-------|----------------------------------|----|
| 110 | ch : | Ī_ | Oid | ده | Presiden | <i>†.</i> | | officer | |
| nis_ | ìs | for | Вил | n King | Purpose | s the | t was | needed. | |
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| | I: | , if other than the |
|--|--|----------------------|
| date this document was signed. | | FileL |
| Effective date if applicable: | | SECRETARY OF STATE |
| | (no more than 90 days after amendment file date) | |
| | | 2016 AUG 25 AM 9: 13 |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient | the shareholders. The number of votes cast for the amend for approval. | Iment(s) |
| | by the shareholders through voting groups. The following so toting group entitled to vote separately on the amendment(| |
| | amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| action was not required. The amendment(s) was/were adopted by | the board of directors without shareholder action and share the incorporators without shareholder action and shareholder | |
| action was not required. | | |
| Dated 8-17-16 | | |
| Dated 8-17-16 Signature | All_ | |
| (Bý a director, | president or other officer - if directors or officers have no | |
| | n incorporator – if in the hands of a receiver, trustee, or other incorporation in the hands of a receiver, trustee, or other incorporation. | er court |
| | Reginald A. Williams (Typed or printed name of person signing) | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |