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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ORANGE PRINT	, INC				
DOCUMENT NUM	BER: P15000039100					
	of Amendment and fee are su	ibmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	ANGEL D CORDOVA					
		Name of Contact Person	n			
	ANGEL D CORDOVA & C	0				
		* *				
	Firm/ Company 780 N.W. 42 AVENUE STE 325					
	Address					
	MIAMI, FL 33126					
		City/ State and Zip Cod	e			
AR@	ACORDOVA.COM					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas		444-5511			
		at (303	de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation of

ORANGE PRINT, INC		
(Name of Corporation as	s currently filed with the Florida Dept. of State)	
P15000039100		
(Document)	Number of Corporation (if known)	
	tutes, this Florida Profit Corporation adopts the following amendment(s)) to
A. If amending name, enter the new name of the corpor	ration:	
GARDEN INVESTMENT ONE, INC	The new	
	corporation," "company," or "incorporated" or the abbreviation lnc," or "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES)	N/A	
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered of new registered agent and/or the new registered office. 		ロニロフ
Name of New Registered Agent NA/A		
New Registered Office Address:	(Florida street address) Florida	
nen negisteren ogreeningsbis.	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	familiar 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 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address '
1) Change		_		
Add				
Remove				
2) Change				
Remove				
3) Change				•
Add		_		
Remove				
4) Change		_		,
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach additional	dding additional Arti sheets, if necessary).	(Be specific)			
N/A					
	·			·	
		want.			
E If an amandman	t provides for an exch	ange reclassificat	ion or cancellation o	ficeued charec	
provisions for it	mplementing the ame	ndment if not cont	ained in the amendm	ent itself:	
(if not appli	cable, indicate N/A)				
N/A					
	<u> </u>			 	

The date of each amendment(s) a date this document was signed.	doption:	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will repartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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		6
	(voting group)	Ές:
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	FILE MAY 17
The amendment(s) was/were addressed action was not required.	opted by the incorporators without shareholder action and shareholder	PH D
DatedSignature	5/15/17 Fr	: 55
(By a c	irector, president or other officer if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	ANA K LOPEZ LUZON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	