## P15000099876

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SEP 2 0 2016

C LEWIS

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MANPOWER IRE	RIGATION & SERVICES, I	NC		
	BER: P15000099876				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	WILMER A. MENJIVAR				
		Name of Contact Person			
	MANPOWER IRRIGATION & SERVICES, INC				
		Firm/ Company			
	7140 SADDLE ROAD	t www company			
		Address			
	LAKE WORTH, FL 33463				
		City/ State and Zip Code			
wilm	er@manpowerirrigation.com				
	E-mail address: (to be u	sed for future annual report r	notification)		
For further informatio	n concerning this matter, pleas	se call:			
WILMER A. MENJIVAR		at (	324-8508		
Name	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depar	tment 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		Division Clifton	nent Section n of Corporations Building		
Tallahassee, FL 32314 2661 Executive Center Circle		ecutive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



2016 SEP 12 PM 2: 39

to

MANPOWER IRRIGATION & SERVICES, INC

(Name of Corporation as c	currently filed with the Florida Dept. of State)
P15000099876	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporat	tion:
	The new reporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
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 and/or the new registered office a	
Name of New Registered Agent	
(FI	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
Signature o	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>	<u>Name</u>	Address
1) Change	CFO	LUIS A. MENJIVAR	7140 SADDLE ROAD
X Add			LAKE WORTH, FL 33463
Remove			
2) Change	<u>s</u>	MELBA C. VASQUEZ	7140 SADDLE ROAD
X Add			LAKE WORTH, FL 33463
Remove			
3) Change	C	MILADYS O. ESPINOZA	7140 SADDLE ROAD
X Add			LAKE WORTH, FL 33463
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)		
ALL SHARES OF THE CORPORATION ARE OWNED IN THE FOLLOWING PERCENTAGES:		
WILMER A. MENJIVAR - 50%		
LUIS A. MENJIVAR - 50%		
F. 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:  (if not applicable, indicate N/A)  N/A		

	SCORETABLY	EU DESTAG
The date of each amendment(s) adoption: date this document was signed.		of if other than the
Effective date if applicable:  (no more than 90 days after amendment file	2016 SEP 1.2	PM 2: 39
(no more than 90 days after amenament file	e aate)	
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will	not be listed as the
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ne amendment(s)	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the amendment		
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by"		
(voting group)		
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder	
Dated 09 04 3016		
· Signature		
(By a director, president or other officer - if directors or officers		
selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	e, or other court	
(Typed or printed name of person signing)	iande Z	
_		
President		
(Title of nerson signing)		