P16000008357

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AUG 1 6 2016

C. CARROTHERS

COVER LETTER

4:

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NA	TURAL GREEN LAWNCARE INC
DOCUMENT NUMBER: P160000	
The enclosed Articles of Amendment	and fee are submitted for filing.
Please return all correspondence cond	terning this matter to the following:
RAMON CAN	IO SOLORIO
	Name of Contact Person
	Firm/ Company
490 16TH ST	NE
NAPLES, FL	Address
IVAI LLS, I L	City/ State and Zip Code
PERITORS (1. O.O.)	·
PEPITO2261@GMA	AIL.COM dress: (to be used for future annual report notification)
E-man au	dress. (to be used for future annual report nonneation)
For further information concerning th	is matter, please call:
RAMON CANO SOLORIO	at (²³⁹) 298-6266
Name of Contact Pers	on Area Code & Daytime Telephone Number
Enclosed is a check for the following	amount made payable to the Florida Department of State:
	Filing Fee & Status Service Certified Copy (Additional copy is enclosed) Service Certified Copy (Additional Copy is enclosed) Service Certified Copy (Additional Copy is enclosed)
 Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32. 	ations Division of Corporations Clifton Building

Articles of Amendment to Articles of Incorporation of

NATURAL GREEN LAWNCARE INC

(Name of Corporation	as currently filed with	the Florida Dept. of State)		
P16000008357				
(Docume)	nt Number of Corporatio	n (if known)		
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Pro	fit Corporation adopts the follow	owing amend	ment(s) to
A. If amending name, enter the new name of the corp	ooration:		The True	Z#IF AUG
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A pre			
B. Enter new principal office address, if applicable:			64 54	<u>਼</u> ੂ
(Principal office address MUST BE A STREET ADDR	<u>EESS</u>)		Dr.	90
				-
C. Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE BOX)				_
				_
		- w.e.w.		
D. If amending the registered agent and/or registered		da, enter the name of the		
new registered agent and/or the new registered of	fice address:			
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:		, Florida		_
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Regis	tered Agent:			
I hereby accept the appointment as registered agent. I		ept the obligations of the posit	ion.	
Signat	ure of New Registered A	gent, 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 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	VP	J. JESUS CANO-SOLORIO	290 4TH ST SE
X Add			NAPLES FL 34117
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(y nor approach, marcare mary	

	08/03/2016	
The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date if applicable:	8/03/2016	
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) 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):	
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/03/2 Dated	016	
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	RAMON CANO SOLORIO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	