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COVER LETTER

Division of Corporations

NAME OF CORPORATION: GUATE LANDSCAPING SERVICES [NC]

DOCUMENT NUMBER: P16000024631

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RIGOBERTO F. DIAZ

Name of Contact Person

GUATE LANDSCAPING SERVICES INC

Firm/ Company

9375 SILVERTHORNE DR

Address

PALM BEACH GARDENS, FL. 33403

City/ State and Zip Code

CL MULTISERVICE 1 & GMAIL COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RIGOBERTO F. DIAZ

Name of Contact Person

Area Code & Daytime Telephone Number

S35 Filing Fee

TO: Amendment Section

☐\$43.75 Filing Fee & Certificate of Status

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐S43.75 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

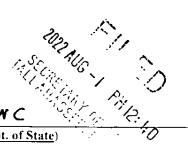
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation



GUATE

LANDSCAPING SERVICES

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

P 16000024631
(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co"chartered," "professional association,"	orp," "Inc," or "Ce	". A professional corpore	rated" or the abbreviation "Corp.," ition name must contain the work
B. Enter new principal office address, in (Principal office address MUST BE A ST		N/A	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O	rable: OFFICE BOX)	N/A	
		-	-
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent	N/A	address in Florida, enter t	the name of the
new registered agent and/or the new	registered office ad	dress:	the name of the
	registered office ad	da street address)	. Florida
new registered agent and/or the new Name of New Registered Agent	registered office ad N/A (Flora	dress:	
new registered agent and/or the new Name of New Registered Agent	registered office ad N/A (Flora N/A anging Registered A	da street address) (City) gent:	Florida(Zip Code)

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)

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> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	MARIO RENE RAMIREZ	9375 SILVERTHORNE DR.
Add			PALM BEACH GARDENS FL. 334
K Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			,
Remove			
6) Change			
Add			
Remove			

u/A		. (Be specific)				
N/A						
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			fication or cance	llation of icerad	charac	
an amendment r	rovides for an eve	change reclacci	ilcacion, or cance	manon or issueu .	siiai Cs ₁	
an amendment p	provides for an exc plementing the am	change, reclassi iendment if not	contained in the	amendment itsel	f:	
<u>rovisions for imp</u>	provides for an exo plementing the am ble, indicate N/A)	change, reclassi lendment if not	contained in the	<u>amendment itsel</u>	<u>f:</u>	
provisions for imp (if not applica	olementing the am	change, reclassi iendment if not	contained in the	<u>amendment itsel</u>	<u>f:</u>	
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
<u>pp</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amend officient for approval.	dment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following cach voting group entitled to vote separately on the amendment(s	statement):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Signature \(\frac{1}{2}\) (By a disclected	rector, president or other officer – if directors or officers have not 1. by an incorporator – if in the hands of a receiver, trustee, or other officers by that fiduciary)	been er court
	RIGOBERTO F. DiAZ (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	
	(Title of person signing)	