

P1600003072

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : BROWARD SOHO SERVICES INC.
Account Number : I20100000080
Phone : (954)366-3850
Fax Number : (954)633-7850

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Taxright7@yahoo.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN
UNLIMITED LANDSCAPING & DESIGN, CORP.

| | |
|-----------------------|---------|
| Certificate of Status | 1 |
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| Page Count | 01 |
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 DEC 15 A 11:37

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DEC 15 2016

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: UNLIMITED LANDSCAPING & DESIGN CORP

DOCUMENT NUMBER: P16000032272

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

Please return all correspondence concerning this matter to the following:

INGRID M CHAJON

Name of Contact Person

UNLIMITED LANDSCAPING & DESIGN CORP

Firm/ Company

11530 NW 56TH DR APT 105 BLDG 13

Address

CORAL SPRINGS, FL 33076

City/ State and Zip Code

TAXRIGHT7@YAHOO.COM

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

For further information concerning this matter, please call:

INGRID M CHAJON

at (561) 908-1855

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

☒ \$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

UNLIMITED LANDSCAPING & DESIGN CORP

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

P16000032272

(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

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

11530 NW 56TH DR APT 105 ~~8106~~ 13

CORAL SPRINGS, FL 33076

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

11530 NW 56TH DR APT 105 ~~8106~~ 13

CORAL SPRINGS, FL 33076

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent INGRID M CHAJON

11530 NW 56TH DR APT 105

(Florida street address)

New Registered Office Address: CORAL SPRINGS

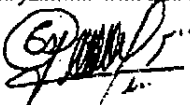
Florida 33076

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

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TALLAHASSEE, FLORIDA

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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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|--|-------|----------------------|--|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | P | DANIEL MADERO | 2019 SW 20TH ST STE 102 FORT LAUDERDALE, FL 33315 |
| 2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | SVP | BYRON CHAJON DEL CID | 2019 SW 20TH ST STE 102 FORT LAUDERDALE, FL 33315 |
| 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | RVP | SANDRA JIMENEZ | 2019 SW 20TH ST STE 102 FORT LAUDERDALE, FL 33315 |
| 4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | P | INGRID CHAJON | 11530 NW 56TH DR APT 105 Building 13 CORAL SPRINGS, FL 33076 (Change of address) |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | | | |

Fax: (954) 833-7850

To:

Fax: (850) 617-6390

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(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. A vertical margin line is positioned on the left side, creating a narrow left margin. The paper appears to be from a notebook or a standard ruled document. There are no markings, text, or drawings on the page.

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)

[illegible]

The date of each amendment(s) adoption: 12/09/2016, if other than the date this document was signed.

Effective date if applicable: 12/09/2016
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 12/09/2016

Signature _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

DANIEL A MADERO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)