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PERCENTARY OF STATE
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NO



JOHN ANDREW JONES CPA PA

September 24, 2018

Ms. Susan Tallent Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

Via Certified Mail #7015 1520 0002 6672 6581

Dear Ms. Tallent,

I am writing in response to your letter dated September 17, 2018. A copy of that letter is enclosed.

Attached are two original Articles of Amendment to the Articles of Incorporation of Jack's Garden Beds, Inc. which amends the name of the company to Urban Abundance, Inc. As indicated in your letter, you have received my client's check in the amount of \$35 for the filing fee.

I trust that this will be sufficient to accomplish the name change. Please contact me if you have questions or need additional information.

Thank you for your consideration in these matters.

Your very truly,

John Andrew Jones

JAJ/drj

cc: Jack Sandquist

Rec. 10/2/2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2018

JOHN ANDREW JONES JOHN ANDREW JONES CPA PA 4580 PGA BLVD., SUITE 213 PALM BEACH GARDENS, FL 33418

SUBJECT: JACK'S GARDEN BEDS, INC.

Ref. Number: P16000077248

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

YOU HAVE SUBMITTED A FORM USED FOR FOREIGN CORPORATION AMENDMENTS. PLEASE COMPLETE THE FLORIDA PROFT CORPORATION AMENDMENT FORM ATTACHED AND RESUBMIT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 618A00019358

Susan Tallent Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION:Back's Garden Bed	s, Inc.				
DOCUMENT NUM	P16000077248					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	John Andrew Jones					
	Name of Contact Person					
	John Andrew Jones CPA PA					
	Firm/ Company					
	4580 PGA Blvd., Suite 213					
	Address					
	Palm Beach Gardens, FL 33418					
	City/ State and Zip Code					
John	@JJonesCPA.com		,			
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
John Jones		at (408-2503) 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 Dep	artment of State:			
S35 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)			
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

with of State) Indopts the following amendment(s) Indopts the fo
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. Florida
(Zip Code)

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)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti- (Attach additional sheets, if necessary)	cles, enter change(s) here: (Be specific)
Not Applicable	
F. If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
Not Applicable	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.)
	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Septemb Dated	er 17, 2018	
Signature	Alsta	
(selec	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	:
	Jack Sandquist	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	