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TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Garden of New Beginnings Inc.							
DOCUMENT NUMBER: P160000855447							
The enclosed Articles	The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corre	spondence concerning this ma	tter to the following:					
	Max Duthie						
		Name of Contact Person	1				
	Garden of New Beginnings						
		Firm/ Company	-				
	PO Box 1448						
		Address	_				
	Stuart FL 34995-1448						
		City/ State and Zip Code	2				
mdut	nie@gardenofnewbeginnings.	200					
	E-mail address: (to be us	ed for future annual report	notification)				
For further information	n concerning this matter, pleas	e call:					
Max Duthie		at (233-7303				
Name (of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	rtment of State:				
\$35 Fiting 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)				
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 habassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301				

Articles of Amendment to Articles of Incorporation of

Garden Of New Beginnings Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P16000085447 (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: 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." 759 South Federal Hwy B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Ste. 200G Stuart, FL 34995 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (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

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check Onc)	Title		Name	Address
1) Change	<u>v</u>		Del Lockett	4591 SE Hanover Ct
Add				Stuart, FL 34997
X 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 Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
NA		
	Jan	
PARAMETER STATE OF THE STATE OF		
F. If an amendment provides for an exchange, reclassification, or ca	ncellation of issued shares,	
provisions for implementing the amendment if not contained in (if not applicable, indicate N/A)	he amendment itself:	
NA		
7/		

	5/27/17	
The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:	7	
Enecuve date in applicable.	(no more than 90 days after amendment file date)	.
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	l not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
-5	(voting group)	
action was not required. The amendment(s) was/were adopt action was not required. 5/27/17 Dated Signature (By a din selected)	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder	FILED 17 JUN-5 PH 6:
• •	d fiduciary by that fiduciary)	. 09
	Max Duthie	
	(Typed or printed name of person signing)	
1	President / CEO	
-	(Title of person signing)	

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