P1700000 2126

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: South FLORIDA HYDROSelding, INC				
DOCUMENT NUMBER: - P170000 2126				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following: CYNTHIA L. MOURE Name of Contact Person South Florida Hydre Seeding, Inc. Firm/Company				
18521 NW 29 TH AVENUE				
City/ State and Zip Code CLMOSCO 3011 C AOL, COM E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
CYNTHIS MOORE at (786) 355-4884 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:				
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation of

South Florida Hya	Lroseeding INC.		
(Name of Corporation as currently for	led with the Florida Dept. of State)		
P1700002	176		
(Document Number of Co			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	rida Profit Corporation adopts the fol	lowing amendm	ent(s) to
A. If amending name, enter the new name of the corporation:		The nev	
name must be distinguishable and contain the word "corporation." "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.)	". A professional corporation name	the abbreviatio	n
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N) 1-	2018 SEP -	Carrier Control
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the	-6 PHI2	1
Name of New Registered Agent (Florida street	<u> </u>	- 16	o c+nt≱.
New Registered Office Address:	, Florida	(Zip Code)	
(Cir	<i>y</i>	(zip Coae)	
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 posi.	tion.	
Signature of New Regi	stered Agent, if changing		

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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	PT John I	<u>Doe</u>	
X Remove X Add	Y Mike SV Sally		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u></u>	Terry J. Moore	18521 NW 29 AVE MICONI, FL 33056
2)XChange Add	PVST	CynthiaL. Moone	18521 NW 29 Ave Miami FL
Remove 3) Change Add			33056
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)
N/A
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)

The date of each amendment(s) a date this document was signed.	loption: September 3,20	019, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendn	ient file date)
Note: If the date inserted in this document's effective date on the D	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adby the shareholders was/were so	pted by the shareholders. The number of votes cas fficient for approval.	st for the amendment(s)
	proved by the shareholders through voting groups. each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for appro	oval
by	(voting group)	
/	(voting group)	
The amendment(s) was/were ad- action was not required.	pted by the board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action	on and shareholder
Dated_Sep	fember 3, 2019	
,	Literary or other officer Lif directors or o	fficers have not been
selecte	d, by an incorporator – if in the hands of a receiver	
appoir	ted fiduciary by that fiduciary)	
	(Typed or printed name of person signi	
		ng)
	President	
	(Title of person signing)	

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