P170000002126

(Re	equestor's Name)		
(Ad	ddress)		
(A	ddress)		
(Ci	ity/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bi	usiness Entity Nam	e)	
(Document Number)			
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COVER LETTER

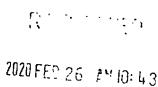
TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: South [Florida Hydr	obeeding . Inc	
DOCUMENT NUMB	ER: 0 17000	0002126 1	<u>, </u>	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this man	TERRY J. NO	oore	
-	Name of Contact Person South FLORIDA Hypro Sweding Inc. Firm/Company			
	18521 NW 29 TH AVENUNE			
		Address		
	terymoone E-mail address: (to be us	City/ State and Zip Code 615@ AoL. C	e notification)	
For further information	concerning this matter, pleas			
Tenny	Moore	at (<u>305</u>	890-8349	
Name o	f Contact Person	Area Co	de & 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)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ing Address		Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 18, 2020

TERRY J. MOORE **18521 NW 29TH AVENUE** MIAMI, FL 33056

SUBJECT: SOUTH FLORIDA HYDRO SEEDING INC.

Ref. Number: P17000002126

We have received your document for SOUTH FLORIDA HYDRO SEEDING INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Irene Albritton Regulatory Specialist II

Letter Number: 420A00003592

to Articles of Incor	noration
of	
SOUTH FLORIDA HY	Pro Secting INC.
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P1700006215	<i>Σ</i> .6
(Document Number of C	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
NIA-	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/B
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A PE B T
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	L of
(Florida street	address)
New Registered Office Address: (Ci	ry) , Florida
New Registered Agent's Signature, if changing Registered Agent:	1
I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position.
Signature of New Reg.	istered bloent, if changing

Page 1 of 4

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	PT John	Doe	
X Remove X Add		Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	PUST	CYNTHIA L. MOORE	18521 NN 29 TH ARE MIAMÍ FI. 33356
2) Change Add	PUST	TERRY J. Moore	18521 NW ZG TH BU
Remove 3) Change Add		·	
Remove 4) Change Add		,	
Remove 5) Change Add			
Remove 6) Change Add Remove			

E. If amending or adding add (Attach additional sheets, if	litional Articles, enter cl necessary). (Be specific	nange(s) here:		
			. <u>.</u>	
	1/2			
	NA			
				
				
If an amendment provides provisions for implement (if not applicable, indi	ing the amendment if no			
		~		
	N/	<i>X</i> 7		
				

	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, to partment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendation flicient for approval.	ment(s)
	proved by the shareholders through voting groups. The following sue 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)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and share	eholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and sharehold	der
Dated 2/	124/20	
Signature	T_1-	
•	irector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or othe	
	ted fiduciary by that fiduciary)	
	TERRI MOORE	
	TERRY MORE (Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	

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