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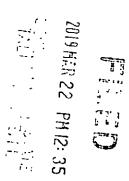
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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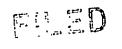
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TOP TURF MI	AMI INC.	
DOCUMENT NUMBE	R:P17000017773		
The enclosed Articles of	Amendment and fee are su	abmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
_	Augusto Egoavil		
		Name of Contact Perso	n
_	EGOAVIL & HORVAT	PLLC	
		Firm/ Company	
	2525 Ponce De Leon Bo	oulevard. Suite 300	
		Address	
	Coral Gables, FL 33134	Į.	
_		City/ State and Zip Cod	e
	4.0 31		
	augusto@egoavilhorva	t.com sed for future annual report	
For further information	concerning this matter, pleas	•	
Augusto Egoavil		at (561) 389-9557
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	the following amount made	payable to the Florida Depa	artment 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)
	ng Address	Street	Address
, ,	dment Section		lment Section
Division of Corporations			on of Corporations
P.O. Box 6327 Tallahassee, FL 32314			Building
ı allan	433CC, FL 32314	2001 E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2019 HAR 22 PM 12: 35

(Normation	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
TOP TURF MIAMI INC. (Document Number P17000017773)	·
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation;	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "C word "chartered," "professional association," or the abbreviation "F	"A professional corporation name must contain the
B. Enter new principal office address, if applicable:	8880 NW 24th Terrace
(Principal office address MUST BE A STREET ADDRESS)	Doral, FL 33172
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8880 NW 24th Terrace
	Doral, FL 33172
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	the mane of the
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
(Cip)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent;	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Registered A	gent, if changing
5 ,	

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	PT J	ohn Doc	
X Remove	<u> V</u> . <u>N</u>	Aike Jones	
X Add		ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Camilo J. Caroso	10350 SW 7th Terrace
X Add			Miami, FL. 33174.
Remove			
2) Change	VP	Michelle Echevarria	10535 SW 154th Ct, Apt 6
X Add			Miami, FL 33196
Remove			
3) Change	T	Ailet Sarabia de Caroso	10350 SW 7th Terrace
X Add			Miami, FL. 33174
Remove			
4) Change	<u> </u>	Gabriel Caroso	10350 SW 7th Terrace
_XAdd			Miami, FL. 33174
Remove			
5) Change	D	Yormar Rincon	351 NW 152nd ND LN
X Add			Pembroke Pines, FL 33028
Remove			
6) Change	VP	Ruben Echevarria	10535 SW 154th Ct, Apt 6
Add			Miami, FL 33196
X Remove			

icles, enter change(s) here: (Be specific)
nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: are the following:
300 shares
250 shares
450 shares

Effective date if applicable:	
	(no more than 90 days after amendment file date)
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 east for the amendment(s) fficient for approval.
The amendment(s) was/were app must be separately provided for	proved 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 the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	
Sciecie	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	CAMILO J. CAROSO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)