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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	: LULU LANDSCA	APING, CORP.	
	7000072249		
The enclosed Articles of Amen	dment and fee are su	bmitted for filing.	
Please return all correspondence	e concerning this ma	atter to the following:	
OLGA I	BAEZ		
	ĬĮ.	Name of Contact Persor	1
435 SW	84 AVE	Firm/ Company	
<del></del>	FL 33144	Address	
		City/ State and Zip Code	2
~	BELLSOUTHNET		V
b-n	iail address: (to be u	sed for future annual report	notification)
For further information concern	 ning this matter, plea: 	se call:	
OLGA BAEZ		at ( 305	226-5705
Name of Contac	t Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made	payable to the Florida Depa	rtment of State:
	43.75 Filing Fee & ertificate 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)
Mailing Add Amendment ! Division of C P.O. Box 632 Tallahassee,	Section orporations	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

LULU LANDSCAPING, CORP.				
(Name of C	orporation as curren	ly filed with the Florida Dept	t. of State)	
P17000072249				
	(Document Number of	of Corporation (if known)	· <del>-</del> ·	
Pursuant to the provisions of section 607.100	 6	Elonida Brofit Componation of	lants the following amands	nant(e) to
its Articles of Incorporation:	o, Florida Statutes, tilis	стопии ттоји Согрогиион ас	lopts the following amendi	ilelii(s) io
A. If amending name, enter the new name	of the corporation:			
HEDGEHUNTERS LANDSCAPING, COR	ii -			
	!!			7W
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designatio	n llCorp." "Inc." or	on, company, or incorpe "Co". A professional corpore	raiea - or ine appreviais ation name must contain t	on he
word "chartered," "professional association	" or the abbreviation	"P.A."		
B. Enter new principal office address, if ap				-
(Principal office address <u>MUST BE A STRE</u>	<u>EET(ADDRESS</u> )		· · · · · · · · · · · · · · · · · · ·	
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C. Enter new mailing address, if applicab	le:			
(Mailing address MAY BE A POST OF I				- 🖰
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D. If amending the registered agent and/or	 r registered office add	lress in Florida, enter the nan	ne of the	
new registered agent and/or the new re			<u></u>	
Name of New Registered Agent				
- The state of the	ii -			
	(Florida e	reet address)		
	1 17 177 1847 31	reer taaressy		
New Registered Office Address:	<u> </u>	(City)	, Florida	-
	l l	(City)	tzip Code)	
New Registered Agent's Signature, if change	ging Registered Agen	t:		
I hereby accept the appointment as registered			s of the position.	
	l'i			
	Signatura of Man	Registered Agent, if changing	<del></del>	
	Signature of New	кедыктуа мууш, 11 спанутд		

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V = Vice I Executive Officer; CFO = held. President, Treasurer Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove,	and/or D if necess rector title President = Chief I r, Directo in the fol ves the co	irector being ary) e by the first ; T = Treasur inancial Off or would be F lowing mann orporation, S	g added:	eer/director being removed and title, name, and  = Trustee; C = Chairman or Clerk; CEO = Chief  ore than one title, list the first letter of each office  the PST and Mike Jones is listed as the V. There is  ese should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doe		
X Remove	Y	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	 	<u>Addres</u> s
1) Change			<u>                                     </u>	
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6) Change	_			
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(Attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	indicate if not contained in the amendment useri.
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	.	20.1 20.17	
The date of each amendment(s) acdate this document was signed.	foption:    	gust 29th, 2017	, if other than the
Aug Effective date <u>if applicable</u> :	ust 29th, 2017 11	7	
		(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De		t meet the applicable statutory filing requirements, this date state's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHE</u>	CCK ONE)	
The amendment(s) was/were ado by the shareholders was/were su		hareholders. The number of votes cast for the amendment(s) oproval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amend	Iment(s) was/were sufficient for approval	
by	<u> </u>	<u> </u>	
	(votiř 	ng group)	
The amendment(s) was/were ado action was not required.	pted by the b	oard of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the in	  corporators without shareholder action and shareholder 	
August 29t Dated	h, 2017	 	
	1/6		
Signature	irector presid	ent or other officer – if directors or officers have not been	<del></del>
selected	d, by an incor	porator – if in the hands of a receiver, trustee, or other court	
appoint	ted fiduciary b	by that fiduciary)	
	Lucia Mende	} 	
	(Т	yped or printed name of person signing)	
	President		
	<del></del>	(Title of person signing)	<del></del>
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