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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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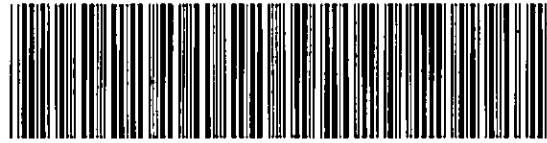
(Business Entity Name)

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2019 DEC 12 PM 4:33

10/31/19

C. GOLDEN  
DEC 12 2019

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** JORGE ESCOBAR BORJA MAINTENANCE LAWN SERVICES INC

**DOCUMENT NUMBER:** P17000079510

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JORGE A ESCOBAR

Name of Contact Person

JORGE ESCOBAR MAINTENANCE LAWN SERVICES INC

Firm/ Company

8401 N BROOKS ST

Address

TAMPA FL 33604

City/ State and Zip Code

JORGEESCOBAR19562104@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JORGE A ESCOBAR

Name of Contact Person

at ( 813 ) 406-2936

Area Code & 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)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

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

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 2, 2019

JORGE A ESCOBAR BORJA  
8401 N BROOKS STREET  
TAMPA, FL 33604

SUBJECT: JORGE ESCOBAR BORJA MAINTENANCE LAWN SERVICES, INC  
Ref. Number: P17000079510

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

You must sign the complete/legal name of the individual signing the document in each signature block.

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.

Claretha Golden  
Regulatory Specialist II

Letter Number: 019A00024369

2019 DEC 12 4:11:05

REC'D 1 20

Articles of Amendment  
to  
Articles of Incorporation  
of

JORGE ESCOBAR BORJA MAINTENANCE LAWN SERVICES INC

(Name of Corporation as currently filed with the Florida Dept. of State)

2019 DEC 12 PM 4:33

P17000079510

(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:**

JAB LANDSCAPING INC

*The new 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."*

8401 N BROOKS ST

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

TAMPA FL 33604

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

8401 N BROOKS ST

TAMPA FL 33604

**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 JORGE A ESCOBAR

8401 N BROOKS ST

(Florida street address)

New Registered Office Address: TAMPA, Florida 33604  
(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.

JORGE A. ESCOBAR

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                      PT        John Doe

X Remove                    V        Mike Jones

X Add                        SV        Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change	<u>PT</u>	JORGE A ESCOBAR	8401 N BROOKS ST
<u>      </u> Add		JORGE A ESCOBAR	TAMPA FL 33604
<u>      </u> Remove			
2) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			
3) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			
4) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			
5) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			
6) <u>      </u> Change			
<u>      </u> Add			
<u>      </u> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

PLEASE CHANGE THE NAME OF MY CORPORATION

THE NEW NAME IS : JAB LANDSCAPING INC

OLD NAME WAS : JORGE ESCOBAR BORJA MAINTENANCE LAWN SERVICES INC

**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)*

Page 3 of 4

The date of each amendment(s) adoption: 12/10/2019. if other than the date this document was signed.

Effective date if applicable: 12/10/2019  
*(no more than 90 days after amendment file date)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for 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)
- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated DECEMBER 10 2019

Signature JORGE A ESCOBAR  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JORGE A ESCOBAR  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)