## PRODOR13

| (Requ                      | uestor's Name) | )            |
|----------------------------|----------------|--------------|
| (Addı                      | ess)           |              |
| (Addr                      | ress)          |              |
| (City/                     | State/Zip/Phor | ne #)        |
| PICK-UP                    | ☐ WAIT         | MAIL         |
| (Busi                      | ness Entity Na | me)          |
| (Doce                      | ument Number   | )            |
| Certified Copies           | Certificate    | es of Status |
| Special Instructions to Fi | ling Officer:  |              |
|                            |                |              |
|                            |                |              |
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Office Use Only



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2018 NOV 26 PM 4: 11 SECRETARY SEE, FL

R. WHITE DEC 042018

## COVER LETTER

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO                           | RATION: E. & F. GOMEZ N                     | URSERY AND LANDSO  | CAPING CORP.   |
|---|---|--|--|
| DOCUMENT NUM                            | P18000029413                                |  |  |
| The enclosed Articles                   | of Amendment and fee are su                 | bmitted for filing.  |  |
| Please return all corre                 | spondence concerning this ma                | tter to the following:   |  |
|   | FRANCISCA AGUILAR D                         | OMINGO   |  |
|   |   | Name of Contact Person   | n  |
|   | E. & F. GOMEZ NURSERY AND LANDSCAPING CORP. |  |  |
|   |   | Firm/ Company  |  |
|   | 1410 NE 11TH ST.                            |  |  |
|   |   | Address  | <u>.                                    </u>   |
|   | HOMESTEAD, FLORIDA 3                        | 33033  |  |
|   |   | City/ State and Zip Cod  | e  |
|   | n concerning this matter, pleas             |  | 730 2013   |
| FRANCISCA AGUII                         |   | at (   | 738-3813   |
| Name                                    | of Contact Person                           | Area Co  | de & Daytime Telephone Number  |
| Enclosed is a check for                 | or 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) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section       |   | Amend  | Address<br>Iment Section   |
| Division of Corporations                |   | Division of Corporations   |  |
| P.O. Box 6327<br>Tallahassee, Ft. 32314 |   | Clifton Building<br>2661 Executive Center Circle                   |  |
|   |   | Tallahassee, FL 32301  |  |

## Articles of Amendment to Articles of Incorporation of

## FILED

E & F GOMEZ NURSERY AND LANDSCAPING CORP.

2018 NOV 26 PM 4: 11

| (Name o   | of Corporation as curren    | tly filed with the Florida Depth of State) STATE  |
|---|-----------------------------|---|
| P18000029413  |                             | THE AMASSEE. FL   |
|   | (Document Number            | of Corporation (if known)   |
| Pursuant to the provisions of section 607, its Articles of Incorporation:               | 1006, Florida Statutes, thi | s Florida Profit Corporation adopts the following amendment(s) to   |
| A. If amending name, enter the new na   | me of the corporation:      |   |
| NA  |                             | The new   |
|   | ration "Corp." Inc." or     | ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the |
| B. Enter new principal office address, if applicable:                                   |                             | NA  |
| (Principal office address <u>MUST BE A S</u>  |                             | NA  |
|   |                             | NA  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) |                             | NA  |
|   | <del> </del>                | NA  |
|   |                             | NA  |
| D. If amending the registered agent an new registered agent and/or the new              |                             |   |
| Name of New Registered Agent  | FRANCISCA AGUILAR DOMINGO   |   |
|   | 1410 NE LITH ST             |   |
|   | tFlorida s                  | treet address)  |
| New Registered Office Address:  | HOMESTEAD                   | . Florida 33030   |
|   |                             | (City) (Zip Code)   |
|   |                             |   |
|   |                             |   |
| New Registered Agent's Signature, if c  |                             | it:<br>with and accept the obligations of the position.   |
| r nevery accept the appointment as regist   | erea agem 1 am jamutai      | with and accept the obligations of the position.  |
| 1 June  |                             |   |
| Jane 1  | 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:

 $P \neq President$ , V = Vice President; T + Treasurer; S - Secretary; D - Director; TR = Trustee;  $C \neq Chairman or Clerk$ ; CEO + ChiefExecutive Officer; CEO + 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.

| Evample:<br>X Change       | <u>PT</u>    | John Doe            |                      |
|----------------------------|--------------|---------------------|----------------------|
| X Remove                   | <u>v</u>     | Mike Jones          |                      |
| X Add                      | <u>sv</u>    | Sally Smith         |                      |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u>         | Address              |
| X Change                   | PRES         | FRANCISCA AGUILAR I | 1410 NE 11TH ST.     |
| Add                        |              |                     | HOMESTEAD, FL. 33030 |
| Remove                     |              |                     |                      |
| 2) X Change                | VP           | EDGAR E. GOMEZ      | SAME                 |
| Add                        |              |                     |                      |
| Remove                     |              |                     |                      |
| 3.) Change                 |              |                     |                      |
| Add                        |              |                     |                      |
| Remove                     |              |                     | <del></del>          |
| 4) Change                  |              |                     |                      |
| Add                        |              |                     |                      |
| Remove                     |              |                     |                      |
| 5) Change                  |              |                     |                      |
| Add                        |              |                     | •                    |
| Remove                     |              |                     |                      |
|                            |              |                     |                      |
| 6) Change                  |              |                     |                      |
| Add                        |              |                     |                      |
| Remove                     |              |                     |                      |

| (Attach additional sheets, if necessary).  |   |
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| If an arrandment areaider for an area  | anno realestification or annothetica of issued shares   |
| If an amendment provides for an exchange in the amendment | nange, reclassification, or cancellation of issued shares,  |
| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares, and and it not contained in the amendment itself:            |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and if not contained in the amendment itself:            |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and it is not contained in the amendment itself:         |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and it is a mendment itself:                             |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and it is a standard in the amendment itself:            |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and an endment if not contained in the amendment itself: |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and and itself:  |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and in the amendment itself:                             |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and in the amendment itself:                             |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:             |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and in the amendment itself:                             |
| provisions for implementing the ame  | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:             |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:             |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, and and itself:  |
| provisions for implementing the ame<br>(if not applicable, indicate N'A)   | nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:             |

|   | NOVEMBER 20, 2018   |                          |
|---|---|--------------------------|
| The date of each amendment(s) adde this document was signed.          | adoption:   | , if other than the      |
|   | OVEMBER 20,2018   |                          |
| Effective date if applicable:   | (no more than 90 days after amendment file date)  | <del></del>              |
|   | (no more than 30 days after amenament fite date)  |                          |
| Note: If the date inserted in this document's effective date on the E | block does not meet the applicable statutory filing requirements, this date we bepartment of State's records.   | ill not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |                          |
| ☐ The amendment(s) was/were as by the shareholders was/were s         | dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.  |                          |
|   | oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):  |                          |
| "The number of votes cas  | at for the amendment(s) was/were sufficient for approval  |                          |
| by  | (voting group)  |                          |
| ,   | (voting group)  |                          |
| ☐ The amendment(s) was/were action was not required.                  | lopted by the board of directors without shareholder action and shareholder   |                          |
| The amendment(s) was/were action was not required.                    | dopted by the incorporators without shareholder action and shareholder  |                          |
| 11/20/20<br>  Dated   | 18  |                          |
| Signature \sign   |   |                          |
| (By a<br>select   | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary) | <del></del>              |
|   | FRANCISCA AGUILAR DOMINGO   |                          |
|   | (Typed or printed name of person signing)   | <del></del>              |
|   | PRESIDENT   |                          |
|   | (Title of person signing)   |                          |