P18000 58574

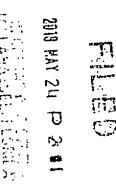
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JUN 1 0 2019 T. LETARUX

COVER LETTER

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: Alliance L	and scaping Solutions, Inc.			
NAME OF CORPORATION: Alliance L DOCUMENT NUMBER: PIROSOO	58574			
The enclosed Articles of Amendment and fee are submitted	d for filing.			
Please return all correspondence concerning this matter to	the following:			
William	Fdward Lyans II			
- Alliance Lar	descaring Solutions Inc.			
5705 Cedar	Jalk Way #102 Address			
Centreville, VA 20121 City/State and Zip Code				
City/ State and Zip Code William _ Lyons @ discover alliance, (om E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person	at (239) 285 - 5 780 Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable				
Certificate of Status Ce	3.75 Filing Fee & S52.50 Filing Fee rtified Copy Certificate of Status dditional copy is closed) (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 Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles	of Amendment
Articles	f Incorporation
Alliante Lands	capino Soutions Inc.
713000585	574
(Document Num	ber of Corporation (if known) (1) Link (2011)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	 <u>p:</u> -
	The new
	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
D. If amending the registered agent and/or registered office	
new registered agent and/or the new registered office ad	igress:
Name of New Registered Agent	
The state of the s	
(rior	ida street address)
New Registered Office Address:	, Florida (City) (Zip Code)
	(City)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	
, петеоу иссерт те арротитет из гезизгет и изет. Тит јит	Har with and accept the obligations of the position.
Signature of	New Registered Agent, if changing
Signature of 1	The state of the s

Executive Officer; CFC held. President, Treasur Changes should be note a change, Mike Jones le Mike Jones, V as Remov) = Chief Financ rer, Director wou ed in the following eaves the corpord	ial Officer. If an ld be PTD. 3 manner. Currei tion, Sally Smith	officer/director holds mor atly John Doe is listed as th	the than one title, list the first letter of each office are PST and Mike Jones is listed as the V. There is see should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u> <u>John</u>	Doe		
X Remove	<u>V</u> <u>Mike</u>	Jones		
_X Add	SV Saliy	Smith		
Type of Action (Check One)	<u>Title</u>	Name		Address
1) Change	(IO	Alteen	, Nick, Chelsey	676 tratevoy
Add Remove				Dr. SE #810 Leesburg, VA 20175
Remove				2011
2) Change				
Add				
Remove				····
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change			_	
Add				
Remove				

Page 2 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief

address of each Officer and/or Director being added:

Please note the officer/director title by the first letter of the office title:

(Attach additional sheets, if necessary)

iacii dudiiionai sheets, ij necessary).	les, enter chang (Be specific)	of at wate.
····································		
an amendment provides for an exch	ange, reclassifica	tion, or cancellation of issued shares,
rovisions for implementing the amen	dment if not con	tained in the amendment itself:
(if not applicable, indicate N/A)		
	1	
	1	

.

The date of each amendment(s) adoption: _ date this document was signed.	April	3011	2017	, if other than the
Effective date if applicable:	April	30+1	2019 mendment file dat	
	(no mbre than !	90 days after a	mendment file dat	è)
Note: If the date inserted in this block does document's effective date on the Department of		icable statutory	filing requirement	nts, this date will not be listed as the
Adoption of Amendment(s)	HECK ONE)			
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		e number of vo	otes cast for the an	nendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting				
"The number of votes cast for the ame	endment(s) was/we	ere sufficient fo	r approval	
by	oting group)		.,,	
The amendment(s) was/were adopted by the action was not required.	board of directors	s without share	holder action and	shareholder
The amendment(s) was/were adopted by the action was not required.	incorporators with	hout sharehold	er action and shan	ehold er
Dated April 3	30th, 201	19		
Signature(By a director, pre	, the			
	orporator – if in th	ne hands of a re		
	(Typed or printed	Edward	Lyons	芷
	President		()	
	(Title	of person signi	ing)	