## P18000088483

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:GROUP HON	ME BONANZA RANCH.	INC
DOCUMENT NUMBER: P18000088483		
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
MAGALY GONZALEZ		
·	Name of Contact Person	1
M & M ACCOUNTING SERV	VICE INC	
	Firm/ Company	
5370 PALM AVE STE 9	, ,	
	Address	
HIALEAH FL 33012		
•	City/ State and Zip Code	:
gonzalez1948@yahoo.com		
E-mail address: (to be use	d for future annual report	notification)
For further information concerning this matter, please	call:	
MAGALY GONZALEZ	at ( 305	557-1662 de & Daytime Telephone Number
Name of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$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	Amendi Division Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

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(Document Number of Corporation (if known)  SECTION OF STATE Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation-adopts-the following and its Articles of Incorporation:  1. If amending name, enter the new name of the corporation:	(Name of Corporation as currently filed with the Florida Dept. of State)  P18000088483  (Document Number of Corporation (if known)  State of section 607.1006, Florida Statutes, this Florida Profit Corporation adopted the following aniendment ion:  enter the new name of the corporation:  The new shable and contain the word "corporation," "company," or "incorporated" or the abbreviation "or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the fessional association," or the abbreviation "P.A."  office address, if applicable:  MUST BE A STREET ADDRESS  address, if applicable:  WEET APOST OFFICE BOX)  (Florida street address)		OI .			
(Document Number of Corporation (if known)    STOPE TORY   STATE   Ursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following and statutes of Incorporation:    If amending name, enter the new name of the corporation:	(Document Number of Corporation (if known)  (Section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment ion:  (Inter the new name of the corporation:  (Inter the new name of the abbreviation (Inter the name of the na	GRO	UP HOME BONANZA	RANCH, INC	-	
(Document Number of Corporation (if known)  STEPT ARY STATE  arsuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation-adopts the following and a Articles of Incorporation:  If amending name, enter the new name of the corporation:  \[ \begin{align*} \text{\text{\text{A}}} & \text{\tex	(Document Number of Corporation (if known)  (Document Number of Corporation (if known)  (State 1 A 1	(Name of Corp	oration as currently f	led with the Florid	da Dept. of State	<u>.                                    </u>
ursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation-adopts the following and a Articles of Incorporation:  If amending name, enter the new name of the corporation:    A	SECTION ISTATIONS of Section 607.1006. Florida Statutes, this Florida Profit Corporation-adopts the following amendmention:    Company		P18000088483		2019 HAY 1 O	AIN
A The must be distinguishable and contain the word "corporation," "company," or "incorporation name must be distinguishable and contain the word "corporation," "company," or "incorporation name must contain "P.A."  Enter new principal office address, if applicable:  (Mailing address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  H 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:	is of section 607.1006. Florida Statutes, this Florida Profit Corporation:  **Enter the new name of the corporation:**  **O A	1)	Document Number of C	orporation (if know	n)	رجا ج وجه من ج.
The must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain or "P.A."  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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:	The new shable and contain the word "corporation," "company," or "incorporated" or the abbreviation "or the designation "Corp., "Inc." or "Co". A professional corporation name must contain the fessional association," or the abbreviation "P.A."  office address, if applicable:  address, if applicable:  AY BE A STREET ADDRESS  address, if applicable:  AY BE A POST OFFICE BOX)  Address:  Cistered agent and/or registered office address in Florida, enter the name of the tand/or the new registered office address:  Cifforida street address:		Clorida Statutes, this <i>Fla</i>	orida Profit Corpor		
Inc. me must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreve Corp.," "Inc.," or "Co.". A professional corporation name must contain the abbreviation "P.A."  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS.)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  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:	shable and contain the word "corporation," "company," or "incorporated" or the abbreviation." or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the fessional association," or the abbreviation "P.A."  office address, if applicable:  SMUST BE A STREET ADDRESS  address, if applicable:  AY BE A POST OFFICE BOX)  istered agent and/or registered office address:  egistered Agent  (Florida street address)  Office Address:  (City)  (Signature, if changing Registered Agent:	. If amending name, enter the new name of	the corporation:			
The must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev Corp., "Inc.," or Co., " or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the abbreviation "P.A."  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS.)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:	shable and contain the word "corporation," "company," or "incorporated" or the abbreviation." or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the essional association," or the abbreviation "P.A."  office address, if applicable:  SMUST BF A STREET ADDRESS  address, if applicable:  AY BE A POST OFFICE BOX)  istered agent and/or registered office address in Florida, enter the name of the tand/or the new registered office address:  egistered Agent  (Florida street address)  Office Address:  (City)  Florida  (Zip Code)		NIA			The new
Principal office address MUST BE A STREET ADDRESS )  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:	istered agent and/or registered office address in Florida, enter the name of the t and/or the new registered office address:    Compared Agent   Compared Agent	"Corp.," "Inc.," or Co.," or the designation	Corp, " "Inc," or "Co	". A professional	incorporated" o corporation nan	or the abbreviation ne must contain the
(Mailing address MAY BE A POST OFFICE BOX)  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:	istered agent and/or registered office address in Florida, enter the name of the t and/or the new registered office address:  egistered Agent  (Florida street address)  Office Address:  (City)  Cip Code)			يم	19	
new registered agent and/or the new registered office address:	t and/or the new registered office address:  egistered Agent  (Florida street address)  Office Address:  (City)  (Signature, if changing Registered Agent:		E BOX)	N	A	
Name of New Registered Agent	(Florida street address)  Office Address: Florida (City)			in Florida, enter	the name of the	
	Office Address: Florida	Name of New Registered Agent	NIA	<u> </u>		
	Office Address: Florida					
(Florida street address)	(City) (Zip Code)		(Florida street	address)		
	Signature, if changing Registered Agent:	New Registered Office Address:			Florida_	Cr. C. L.
		<del> </del>	Signature of Nove Regi	starad Agant if aha		

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	<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> Nаше</u>	Address
1) X Change	V/P	SANDRA PUYO	21455 SW 236 ST
Add			HOMESTEAD FL 33031
Remove			
2) Change	Р	DIANA CAMILA ACEVEDO	21455 SW 236 ST
X Add			HOMESTEAD FL 33031
Remove			<del></del>
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	-		
Remove			
(i) Channe			
6) Change			
Add			
Remove			

The purpose of which this corporation is organized is:  Agricultural purpose, sale of nursery Plants and agricultural supplies  Agricultural purpose, sale of nursery Plants and agricultural supplies  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 NA)	E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)  ARTICLE III
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)	The purpose of which this corporation ia organized is:
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	Agricultural purpose, sale of nursery Plants and agricultural supplies
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
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	provisions for implementing the amendment if not contained in the amendment itself:
<del></del>	

May 8, 2019 The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : $\sim \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	
Effective date if applicable: P   H   (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 document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ 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):	at .
"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	
(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)	
SANDRA PUYO	
(Typed or printed name of person signing)	
PRESIDENT/DIRECTOR	
(Title of person signing)	