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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: (SD) Florida	Lawn Landersoina Cut
DOCUMENT NUMBER: P18000888	371 Inc
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following Name of Contact Name of Contact Firm Comp Address Address City/ State and Z	e PKwy Ste 120 34116
Email address: (to be used for future armual	report notification) Treport notification
For further information concerning this matter, please call: Let Sa Palacue at 2 Name of Contact Person A	39 331-8718 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Floric	
\$35 Filing Fee	Certificate of Status
	Street Address Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to

	Articles of Incor	poration			
6SD Florida (Name of Corpor	of ration as currently f	Land Scaffiled with the Florida Dep	ot. of Stale)	uts=	Do
118000	<u>3880C</u>	7			
(Do	cument Number of C	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	rida Statutes, this FI	orida Profit Corporation a	dopts the followi	ng amendmen	ıt(s) to
A. If amending name, enter the new name of the	e corporation:			Th.	
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp." "Inc," or "Co	o". A professional corpor	orated" or the cration name musi	The new abbreviation to contain the	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)				
D. If amending the registered agent and/or reginew registered agent and/or the new register		s in Florida, enter the na	me of the	18 OEC -6	#
Name of New Registered Agent	tu omee address.			7. P# 2:	1900 1900 1900 1900 1900 1900 1900 1900
	(Florida street	(address)		- 2	
New Registered Office Address:	(*		Florida	_	35. 60
New Registerea Office Address.	(C	Tity)	_, F10110a(Zip	Code)	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen		h and accept the obligation	ns of the position.		
S	ignature of New Reg	istered 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:	c, ana bang a	5711111, 57 (L) U11 71UU.	
X Change	<u>PT</u> <u>Jo</u>	ohn Doe	
X Remove	<u>V</u> <u>N</u>	<u> Aike Jones</u>	
X Add	<u>SV</u> <u>\$</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		Yeisang Bravo	233 Baltusral Di
Add			Naples, Pl 34113
Remove	0	-	
2) Change	<u> </u>	Elias Bravo	233 Baltusrol Dr
_X Add			Naples, FL 34/13
Remove			
3) Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ieles, enter change (Be specific)			
				
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				<u>-</u>
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f an amendment provides for an exception of the amendment provisions for implementing the amendment of the a	hange, reclassificat	ion, or cancellation	of issued shares,	
(if not applicable, indicate N/A)	<u>mument a not con</u>	amed in the amend	ment usen.	
			· · ·	
				
				

The date of each amendment(s) adoption: 12/3/18, if other than the
date this document was signed.
Effective date if applicable: 13/3/16
(no more than 90 days after imendment 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 east 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)
(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 12 3 8
Signature
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)
appointed touchary by that reducinty)
Elias Brava
(Typed or printed name of person signing)
President.
(Title of person signing)