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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:

DOCUMENT NUMBER:
P18000093058

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

Please return all correspondence concerning this matter to the following:

Bridgett Donalson	
Name of Contact Person	
J-N-C Sod, Inc	
Firm/ Company	
1389 Timberhill St	
Address	
North Port, FL 34288	
City/ State and Zip Code	
sales@jncsod.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

 Bridgett Donalson
 at (239) 677-7068

 Name of Contact Person
 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

Articles of Amendment to Articles of Incorporation of

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	tly filed with the Florida Dept. of State)
18000093058	· • • • • • • • • • • • • • • • • • • •
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	s Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation," 'Inc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	~``; 3
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Φ
(maining address MAT BE AT OST OFFICE BOA)	
	<u></u>
	<u></u>
. If amending the registered agent and/or registered office add	fress in Florida, enter the name of the
new registered agent and/or the new registered office addres	
Name of New Registered Agent	
Name of New Registered Agent	
	reet address)

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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.

X Change	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Bridgett Donalson	1389 Timberhill St
Add			North Port, FL 34288
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

(Attach	ing or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)	
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<u>lf an ai</u>	endment provides for an exchange, reclassification, or cancellation of issued shares,	
<u>provis</u> (<i>ij</i>	ons for implementing the amendment if not contained in the amendment itself: ot applicable, indicate N/A)	
	· · · · · · · · · · · · · · · · · · ·	

The date of each amendment		, if other than the
date this document was signed	11/1/2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	date)
	his block does not meet the applicable statutory filing require ne Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without sh	nareholder action and shareholder
☐ The amendment(s) was/wer by the shareholders was/w	e adopted by the shareholders. The number of votes cast for the ere sufficient for approval.	e amendment(s)
	e approved by the shareholders through voting groups. The fold for each voting group entitled to vote separately on the amen	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	·	
	(voting group)	
Dated <i>[</i>	1/1/20	
Signature(B	y a director, president or other officer - if directors or officers	have not been
	lected, by an incorporator – if in the hands of a receiver, trusted pointed fiduciary by that fiduciary)	e, or other court
	Johnny E Donalson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	