P19000095196

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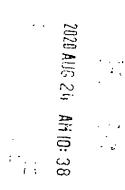
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: OG GREENERY, INC. DOCUMENT NUMBER: P18000095196 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Oscar Trinidad Name of Contact Person Firm/ Company 3939 SW 54th Ave Address Davie, FL 33314 City/ State and Zip Code oscarjtrinidad@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Oscar Frinidad at (754) 281-6283

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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TATABLE, MALLENC.	
· · · · · · · · · · · · · · · · · · ·	tly filed with the Florida Dept. of State)
P18000095196	······································
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
11/4	The new
name most 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.	"company," or "incorporated" or the abbreviation "Corp , " A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRESS)	202
	2020 AUG 24
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A = ·
	<u></u>
	38
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the
new registered agent and/or the new registered office addres	<u>ss:</u>
Name of New Registered Agent N/A	
•	
(Florida st	treet address)
Van Baristana Ciffee Adams	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New I	Registered Agent, if changing
Check it 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.

Example:

<u>PT</u>	John Doe	
<u>V</u>	Mike Jones	
<u>sv</u>	Sally Smith	
Title	<u>Name</u>	<u>Addres</u> s
CFO	Jose Oscar Trinidad	3939 SW 54th Ave
		Davie, Fl., 33314
	_	
	SV Title	V Mike Jones SV Sally Smith Title Name

I/A	sary). (Be specific)		
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f an amendment provides for a provisions for implementing the (if not applicable, indicate N	n exchange, reclassification, or one amendment if not contained in [1/A]	cancellation of issued sharn the amendment itself:	res,
provisions for implementing the (if not applicable, indicate N	e amendment if not contained in	cancellation of issued sharn the amendment itself:	res,
provisions for implementing the (if not applicable, indicate N	e amendment if not contained in	cancellation of issued sha n the amendment itself:	es,
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orovisions for implementing the (if not applicable, indicate N	e amendment if not contained in	cancellation of issued sharen the amendment itself:	es,
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<u>provisions for implementing the</u>	e amendment if not contained in	cancellation of issued sharen the amendment itself:	
orovisions for implementing the (if not applicable, indicate N	e amendment if not contained in	cancellation of issued sha n the amendment itself:	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
the three date <u>it applicable</u> : too more than 90 days	after amendment file date)
Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	tatutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board caction was not required.	of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The numb by the shareholders was/were sufficient for approval.	er of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through views to be separately provided for each voting group entitled to vote se	
"The number of votes cast for the amendment(s) was/were suffi	cient for approval
by	
by(voting group)	 '
a.u. / -	
Dated8/18/20	
Signature	
(By a director, president or other officer – if	directors or officers have not been
selected, by an incorporator - if in the hands	
appointed fiduciary by that fiduciary)	
Oscar J Tr	inidad
(Typed or printed name of	f person signing)
Place 1. at	•
(Title of person signing)	<u> </u>