## P19000000553

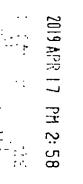
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800326413448

03/19/19--01015--010 \*\*30.00 04/17/19--01008--001 \*\*5.00



R. WHITE ARR 18 2013



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2019

MONICA CORRALES 5631 W 21ST CT HIALEAH, FL 33016

SUBJECT: VIVO LANDSCAPE DESIGN ON THE SPOT, INC.

Ref. Number: P19000000553

We have received your document for VIVO LANDSCAPE DESIGN ON THE SPOT, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$5.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist III

Letter Number: 719A00006323

## **COVER LETTER**

Divi	ision of Corp	orations						
elib iezee.	VIVO LANDSCAPE DESIGN ON THE SPOT, INC.							
SUBJECT:		Name of Lim	ited Liability Company					
The enclosed	Articles of A	mendment and fee(s) are sub	mitted for filing.					
Please return	all correspon	dence concerning this matter	to the following:					
		CORRALES, MONICA						
			Name of Person	<del></del>				
	VIVO LANDSCAPE DESIGN ON THE GO INC.							
	Firm/Company							
	5631 W 21 ST CT							
			Address					
		Hialeah, FL 33016						
			City/State and Zip Code					
		E-mail address; (	to be used for future annual report notif	ication)				
For further in	formation co	ncerning this matter, please ca	all:					
CORRALES	S, MÓNICA		786 322-0324					
	Name of	Person	at () Area Code Daytime	Telephone Number				
Enclosed is a	check for the	following amount:						
□ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

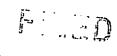
TO:

Registration Section

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



VIVO LANDSCAPE DESIGN ON THE SPOT, INC.

2019 APR 17 PM 2:58

	······································
(Name of Corporation	as currently filed with the Florida Dept. of State)
19000000553	TALL STATE
(Docume	nt Number of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida 5 s Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the corp	poration:
IVO LANDSCAPE DESIGN ON THE GO INC.	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the bbreviation "P.A."
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>	RESS )
. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	· · · · · · · · · · · · · · · · · · ·
(Mailing address <u>MAY BE A POST OF FICE BOX</u>	
(Mailing address <u>MAY BE A POST OF FICE BOX</u>	
	d office address in Florida, enter the name of the
. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the name of the
If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the name of the ffice address:
. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the name of the ffice address:
. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florida, enter the name of the ffice address:

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	$\underline{PT}$	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jor	ne <u>s</u>	
X Add	<u>sv</u>	Sally Sm	nith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		<del>_</del>		
Add				

Attach additional sheets, if necessary).	icles, enter change(s) (Be specific)			
<del></del>				
<del></del> ·		<del></del>		
			<u></u>	
		<del></del>		
· · · · · · · · · · · · · · · · · · ·				
<del></del>				
<u> </u>		<del> </del>		
<u></u>		<u> </u>	·	
f an amendment provides for an exch provisions for implementing the ame	<u>nange, reclassification</u> endment if not contain	<u>1, or cancellation of</u> ned in the amendme	issued shares, nt itself:	
(if not applicable, indicate N/A)				

	MARCH 11, 2019	°C also also a state
The date of each amendment(s) addate this document was signed.	1option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this darepartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(sufficient for approval.	)
	proved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
■ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholde	г
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
MARCH I	1, 2019	
Dated		
Cianatana	(	
Signature(By a c	b. er – if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other cour	t
appoin	ted fiduciary by that fiduciary)	
	MONICA CORRALES GARCIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	