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SECRETARY OF SIATE
TALLAHESSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO		re, Inc.				
DOCUMENT NUM	BER: P19000008082					
	of Amendment and fee are sul	omitted for filing.				
Please return all corre	spondence concerning this mat	ter to the following:				
	Amanda Pacheco					
		Name of Contact Person				
	Ormond Lawn Care, Inc.					
		Firm/ Company	- 1 - 1			
	1160 Clifton Road					
		Address				
	Deleon Springs, FL. 32130)				
		City/ State and Zip Code	:			
riros	sitto@aol.com					
' —	_	ed for future annual report	notification)			
For further information	on concerning this matter, pleas		295-1016			
		at (386	·			
Name	of Contact Person	Arca Coo	le & Daytime Telephone Number			
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment 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)			
Am Div P.O	endment Section ision of Corporations Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303			

Articles of Amendment to Articles of Incorporation of

Ormond Lawn Care, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P19000008082 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. 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: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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:		•		
X Change	PT	John Doe		
X Remove	$\underline{\mathbf{v}}$	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	P	Robert Rossitto	1160 Clifton Road	
Add			Deleon Springs, FL. 32130	
X Remove				
2) Change	P 	Amanda Pacheco	1160 Clifton Road	
X Add			Deleon Springs, FL. 32130	
Remove 3) Change	*******			
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
δ) Change				
Add				
Remove				
		Page 2 of 4		
E. <u>If amending or addir</u>	ng additio	onal Articles, enter change(s) here:		
(Attach additional she	ets, if nec	essary). (Be specific)		

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F. If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:	
		
		
		<u> </u>
	Page 3 of 4	
The date of each amendment(s) adoption: date this document was signed.	December 8, 2019	, if other than the
Effective date if applicable: 12/08/2019	(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 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 was/were suffice		he number of votes east for the amendment(s)
		rough voting groups. The following statement o vote separately on the amendment(s):
"The number of votes cast for	the amendment(s) was/w	cre sufficient for approval
by		."
,	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	d by the board of director	rs without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators wi	thout shareholder action and shareholder
Dated December 08	1//	
(By a direc selected, b	tor, president or other off	icer – if directors or officers have not been he hands of a receiver, trustee, or other court y)
Ro	bert Rossitto	
	(Typed or printed	I name of person signing)
Pre	esident	
(Til	tle of person signing)	