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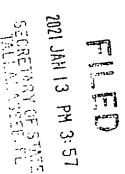
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ion: <u>Getgreen</u>	hauni S	services Inc		
DOCUMENT NUMBER	P19000016	328			
The enclosed Articles of A	mendment and fee are sub-	mitted for filing.			
Please return all correspon	dence concerning this matte	er to the following:			
	Cetgreen Lawn Services Inc Firm/Company 2832 Vinginia Dr Kissimmer Fl 34741 Address Kissimmer Fl 34741 City/State and Zip Code Getgreen lawn. Inc Dymail. Com E-mail address: (to be used for future annual report notification)				
For further information cor	ncerning this matter, please	call:			
Name of Co	ontact Person	at (Area	Code & Daytime Telephone Number		
Enclosed is a check for the	following amount made pa	ayable to the Florida D	Department of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
Division P.O. Box	ent Section of Corporations	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FI. 32303			

Articles of Amendment to Articles of Incorporation of

FILED

2021 JAN 13 PM 3:57

Getgreen laws Je	by filed with the Florida Dept. of State
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P 1900001635E	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name 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."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	2832 Virginia Pr Kissimuee
(Principal office address MUST BE A STREET ADDRESS)	F1 34741
	FT 34111
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2832 Virgivia Dr Kissimmer
(muning dances MAT BE AT OST OFFICE BOA)	
	F1 34741
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
Name of New Kegmerea Agent	······································
(Florida st	reet address)
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>
I hereby accept the appointment as registered agent. I am familiar v	with and accept the obligations of the position.
Signature of New R	legistered Agent, if changing
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)

Example:

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
_X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	PSP	Madeline Caceres	2832 Virginia Dr Kissimme
Add			F1 34741
Remove 2) Change	PSD	Victor Rivera	2832 Virsinia D Kissimmer Fl 34741
Add Remove 3) Change Add			
Remove 4) Change Add			
Remove 5)ChangeAdd			
Remove 6)ChangeAdd			
Remove			

<u></u> (An	ach <i>additio</i>	nal sheets,	dditional A if necessary	a. Besp	ecific)	· · · · · · ·			

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∹. <u>If a</u>	n amendn	ent provid	<u>les for an e</u>	xchange, re	<u>eclassificati</u>	on, or cance	<u>llation of issu</u> amendment i	red shares.	
pr			inting the a adicate N/4)		ir not conta	unca in the	<u>amenament</u>	useu:	
			·						
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	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	y ·
Note: If the date inserted in this bidocument's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the artificient for approval.	nendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendme	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	. <u></u> .	
·	(voting group)	
Dated 12 /	28/20 Sn Con	
selected	rector, president or other officer – if directors or officers have l, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	Madelive (aceres (Typed or primed name of person signing)	
	President	
	(Title of person signing)	