## P19000 058 347

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

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AUS 09 7173 SCHROEDER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	i:	PM LANDSCAPING CO	Ki'
DOCUMENT NUMBER:	P1900058347		
The enclosed Articles of Amer	idment and fee are su	ibmitted for filing.	
Please return all corresponden	re concerning this ma	tter to the following:	
		PEDRO MENDOZA	
<del></del>	Name of Contact Person		
	PM LANDSCAPING CORP Firm/ Company		ORP
			<del></del>
		2401 S WIGGINS RD Address	
	<del></del>		
	PLANT CITY, FL 33566		6
City/ State and Zip Code		le	
For further information concer PEDRO MEN	-	813	650-7028
Name of Contact Person		at ( Area Co	)
Enclosed is a check for the following	owing amount made	payable to the Florida Dep	artment of State:
-	43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ado		Street Address	
Amendment		Amendment Section	
Division of C P.O. Box 63.		Division of Corporations	
Tallahassee,		Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## PM LANDSCAPING CORP

(Name of Corporation as currently filed with the Florida Dept. of S	tate)		
P19000058347			
(Document Number of Corporation (if known)		•	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts its Articles of Incorporation:	the followi	ng amei	idment(s) i
A. If amending name, enter the new name of the corporation:			
		****	
name must be distinguishable and contain the word "corporation," "company," or "incorporated "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation word "chartered," "professional association," or the abbreviation "P.A."	or the o	The abbrevi   contail	ation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	<del></del>		_
C. Enter new mailing address, if applicable:			_
(Mailing address MAY BE A POST OFFICE BOX)	JALL TALL	19	_
	######################################	AUG +2	
<ol> <li>If amending the registered agent and/or registered office address in Florida, enter the name of new registered agent and/or the new registered office address:</li> </ol>	the Ma	P	T
	120	No	D
Name of New Registered Agent	RATE DA	- 0	
(Florida street address)		_	
New Registered Office Address:	: 1		
New Registered Office Address:		Code)	
	·		
Sew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of th			
мессу месер на арронитет из registered ogen i am juminar wim una accept the obligations of th	e 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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	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	MARIA SILVA	2401 S WIGGINS RD
XAdd			PLANT CITY, FL 33566
Remove			
2) Change			
Add			
Remove			
3 ) Change			AS
Add			9 AUG
Remove			45.85E
4) Change			P. R. IT
Add			DRAG O
Remove			
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
ADD IN ARTICLE VII: THE TITLE, NAME AND ADDRESS OF THE OFFICER.			
- TITLE: VP			_
- MARIA SILVA			
- 2401 S WIGGINS RD, PLANT CITY, FL 33566			
			_
	_	<del></del>	
			_
	- 11		
		_	
		·	_
	SCC SCC SCC SCC SCC SCC SCC SCC SCC SCC	<del>35</del>	—
	HAS	AUG -	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	3.3.5 2.3.5 3.3.5.5	-2	[
(if not applicable, indicate N/A)		PK.	П
N/A	808 818	N	
	Dr.	0	
			_
		_	—
	_		—

The date of each amendment(s) add	ption:	, if other tha
date this document was signed,		
Effective date if applicable:		
	tno more than 90 days after amendment file do	ate)
<b>Note:</b> If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirement of State's records.	ients, this date will not be listed a
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes east for the a ficient for approval.	unendment(s)
	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amenda	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	ted by the board of directors without shareholder action and	49 8E
☐ The amendment(s) was/were adopaction was not required.	ted by the incorporators without shareholder action and sha	PLCREFAR)
Dated	JULY 30, 2019	
Signature	Pedro Mendoza	
selected.	ector, president or other officer – if directors or officers hav by an incorporator – if in the hands of a receiver, trustee, o d fiduciary by that fiduciary)	
	PEDRO MENDOZA	
-	(Typed or printed name of person signing)	
	PRESIDENT	
<del>-</del>	(Title of person signing)	