Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210001165093)))



H210001165093ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

ر. در

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I200000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

 :

COR AMND/RESTATE/CORRECT OR O/D RESIGN L & N NURSERY CORP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

MAR 24 2021 Help

4/2021 12:02	3052201440	LAZARUS CORPORA	TE	PA	IGE 02
	¢				•
		Articles of Amendment			
		to			
	. A	articles of Incorporation of			
	/ 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	CIN NOUL	bery Corp			_
Florida Docume	nt Number: P19000078	8602			
Pursuant to the p	provisions of section 607.10 Iment(s) to its Articles of In	06, Florida Statutes, this Flori	da Profit C	orporation add	pts the
	ment(s) to its Afficies of in	corporation:			
-CVAL	GE AU AN	presses to	1822	5 5W 1	884
Miami	F1 22100		•		ST
	16 220				
			-		
-					
	· · · · · · · · · · · · · · · · · · ·			· 	··
	_				
			-	[] [⊖ T မ	
		· :	 -	<u> </u>	3
		·		一番の 一	السيا
				56 721	
		03/19/2021		, ltt. 01	
These articles of a	mendment were adopted on _	03/17/2021	_ .		
The corporation ha	as only one group of voting st	ock. This amendment was appro	oved by the s	hareholders and i	the numb
votes cast for amer	adment was sufficient for app	roval.	and by mile (are manne
,	\mathcal{L}) <u> </u>			
	JAY.	W			
		Sighature			
	<u>Luis</u>	L Bevitez SL	. Plec	·	
		Dained Manager 1 Tists			
		Frings Name and Tiue			
New Remistered A.	gent's Signature, if changing	Perinter Name and True			

Signature of New Registered Agent, if changing