# P20000016529

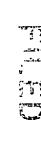
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### **COVER LETTER**

Division of Corporations NAME OF CORPORATION: Hope Everlesting Landsceping Professionals & Services Inc P200000 165 29 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Everlesting Landsceping Professionals & Services I Box 296
Address City/ State and Zip Code HELPSINCT & SMC. 1. COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Contact Person at (407), 364-07/2

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee

> Certified Copy (Additional copy is

enclosed)

### **Mailing Address**

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status

#### Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Status

Certified Copy (Additional Copy

is enclosed)

## Articles of Amendment Articles of Incorporation of

	Articles of Incor	poration		E C	$\wedge$
HOPE EVERLASTING LAWN PROFES	SSIONALS & SERVICES, IN	IC .		1/2	
(Name o	f Corporation as currently f	iled with the F	lorida Dept. of Stat	<u>e</u> ) 7	3
P20000016529				٠ <u>٠</u> ٠٠	
	(Document Number of C	orporation (if k	nown)	:; <u>; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; </u>	رې
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Flo	o <mark>rida Profit C</mark> o	rporation adopts the	following amen	dment(2) to
A. If amending name, enter the new na	me of the corporation:				
HOPE EVERLASTING LANDSCAPING	G PROFESSIONALS & SER	VICES, INC		The	new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"  B. Enter new principal office address, i	orp," "Inc," or "Co". A p or the abbreviation "P.A."	rofessional co	corporated" or the ab rporation name mu.	st contain the v	rp" vord
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C	OFFICE BOX)	Not	Applica		
D. If amending the registered agent an		<u>s in Florida, e</u>	nter the name of the	<u>ŧ</u>	
new registered agent and/or the new					
Name of New Registered Agent	Not Applicable		<del></del>		
		<u>.                                      </u>			
	(Florida street	address)			
New Registered Office Address:	Not Applicable		, Florida	1	
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	nanging Registered Agent:	ity) h and accept th	e obligations of the p	oosition.	
	Not A Signature of New Reg	istered Agent, i	ole f changing		

Check if applicable

 $\square$  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)

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 Doe		
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>		Address
1) Change		Not Applicable	<del> </del>	
Add			,	
Remove				
2) Change		_		
Add		(	\`(G	
Remove 3) Change	<del></del>		110	
Add			V	
Remove				
4) Change		_		
Add				
Remove				
5) Change	+	<u> </u>		
Add	<u> </u>			
Remove	`			
6) Change				
Adđ				
Remove				

(Attach additional sheets, if neces of Applicable	· · · · · ·				
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If an amendment provides for provisions for implementing t	an exchange, recl	assification, or	cancellation of	issued shares,	
(if not applicable, indicate	N/A)	not Contained i	ii the amename		
lot Applicable					
		· · · · · · · · · · · · · · · · · · ·			
		<u> </u>	<u> </u>		
	<u> </u>		<u> </u>		

05/20/2021
The date of each amendment(s) adoption:
Effective date if applicable: (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 incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
. Not Applicable
by NOT IT DICCOTC
05/20/2021 Dated
Signature (By a director, president or other officer – if directors or officers have not been
selected, by an incorporator - if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Arroyo Sanders Sr
(Typed or printed name of person signing)
Chairman
(Title of person signing)