P20000039341

(Requ	estor's Name)		
(Addre	ess)		
(Addre	ess)		
(City/S	State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Busin	ness Entity Nam	e)	
(Docu	ment Number)		
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2.3.1" 20 FH 1:39

C. GOLDEN AUG 2 9 2020

COVER LETTER

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NUMBERY INC. SN 155 NEWUG Address E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>305)</u> <u>2-83 - 00 78</u> 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 Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

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

Street Address

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

is enclosed)

Articles of Amendment to

Articles of Incorporation

of

EDB Nursery,	Inc.		2000 20	PH 1:39
(Name of Corporation	n as currently file	ed with the Florida Dept. o	f State)	
P2 00000 39	341			
(Docume	ent Number of Cor	poration (if known)		
Pursuant to the provisions of section 607.1006, Florida state of Incorporation:	Statutes, this <i>Flori</i>	i da Profit Corporation adop	ots the following a	mendment(s) to
A. If amending name, enter the new name of the cor	poration:			
			TI	he new
name must be distinguishable and contain the word "cor "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A pro-	any," or "incorporated" or ofessional corporation nam	the abbreviation	'Corp., "
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDI</u>	<u>RESS</u>)			
	_			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0 _ —			
D. If amending the registered agent and/or registered new registered agent and/or the new registered o		n Florida, enter the name	of the	
Name of New Registered Agent				
	(Florida street ac	ldress)		
New Registered Office Address:		, F	lorida	
	(City))	(Zip Cod	e)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		and accept the obligations o	of the position,	
Signal	ure of New Regist	ered 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)

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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mik</u> s	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
l) Change	VP	ELVIN Deaz	17761 SW 143 CV
Add Remove			17761 SW 143 EV MPump, Fe. 3317
2) Change	SECIE	Elvin Diaz	17161 SW 143 CF
Add Remove 3) Change			MPani, FL. 331)
Add Remove 4) Change Add			
Remove 5/ Change Add			
Remove 6) Change Add			
Remove			

	litional sheets, if nece	ssary). (Be speci	(Jic)			
					<u></u>	
				 .		
 -			.		 	
						
						-
F. <u>If an ame</u>	ndment provides for	an exchange, recla	assification, or ca	ncellation of issi	ue <u>d shares,</u>	
	s for implementing t		not contained in	the amendment	itse <u>lf:</u>	
(ij na	t applicable, indicate	197.4)				
		· · · · · · · · · · · · · · · · · · ·		_		
		_				
						

The date of each amendment(s) ac	option:	
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after ame	ndment file date)
Note: If the date inserted in this b document's effective date on the De		ling requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of director	s without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of vote fficient for approval.	es cast for the amendment(s)
	roved by the shareholders through voting group each voting group entitled to vote separately (
"The number of votes cast	or the amendment(s) was/were sufficient for	approval
by		··
	(voting group)	
DatedSignature	07/16/2020	
selected	ector, president or other officer – if directors, by an incorporator – if in the hands of a receed fiduciary by that fiduciary)	
	Erabis Diaz (Typed or printed name of persons	signing)
	(Title of person signing)	