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(Re	equestor's Name)			
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(Business Entity Name)				
(Do	ocument Number)			
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Jan Marcos Landcuping Corp						
DOCUMENT NUMBER: 861974241						
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 Firm/ Company						
7253 NW 12 th st Address						
Address						
City/ State and Zip Code						
E-mail address: (to be used for future-annual report notification)						
For further information concerning this matter, please call:						
Name of Contact Person Area Code & Daytime Telephone Number						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
□ \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810						

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation

SANMARCOS LANDS COPING COPP. (Name of Corporation as currently filed with the Florida Dept. of State)	
P 2 100000 1-9 17 (Document Number of Corporation (if known)	
rsuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) Articles of Incorporation:	to
If amending name, enter the new name of the corporation:	
The new me must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," nc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word hartered," "professional association," or the abbreviation "P.A."	
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent 300 n Marcos Carrazana Final State (Florida street address)	
New Registered Office Address: Miami Florida 33126 (City) (Zip Code)	
ew Registered Agent's Signature, if changing Registered Agent: ereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/arc being filed pursuant to s. 607.0120 (11) (c), 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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	NA	<u> </u>	
Add			
X Remove			
2) Change	Y	Chislery Napoles	751 SW 10 St Apt Hr
Add			Miami FL. 33130
Remove Change			
Add			
Кенюус			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach haamona and	eets, if necessary).	. (Be specific)			
N/A						
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16			ification and	unadlation of i	annad abarras	
. <u>If an amendment provisions for impl</u>	ementing the am	endment if no	t contained in	the amendme	it itself:	
(if not applicable	le, indicate N/A)					
N/A						
				-		
			<u> </u>			
						
		· · ·	············			

The date of each amendment(s) adoption date this document was signed.	on: 06/05	2021	, if other than the
Effective date <u>if applicable</u> :	06 05 7 (no more than 90	2071 days after amendment	file date)
Note: If the date inserted in this block of document's effective date on the Department.		able statutory filing req	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☑ The amendment(s) was/were adopted by action was not required.	by the incorporators, or b	oard of directors withou	at shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient		number of votes cast fo	or the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each	by the shareholders throwoting group entitled to	ough voting groups. The cote separately on the a	e following statement mendment(s):
"The number of votes cast for the	e amendment(s) was/wei	e sufficient for approva	i
by $\frac{N/A}{}$			-
	(voting group)		
Signature(By a director selected, by a	r, president or other office an incorporator – if in the fuciary by that fiduciary)	er – if directors or office hands of a receiver, tn	
	Toon M (Typed or printed i	rame of person signing)	vazona Izquierdo
	(Title of person sig	Levit	