## P21000013754

(Requestor's Name)
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J. FASO!!
JUL 02 2021

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LEFT COAST LA	NDCAPE, INC.		
DOCUMENT NUM	BER: P21000013754			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Suzanne Park			
		Name of Contact Persor		
		Firm/ Company		
	720 Texas St			
		Address		
	Englewood, FL 34223			
		City/ State and Zip Code	2	
	bitofhoperanch@msn.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		
Suzanne Park		941 at (	650-5414	
Name	of Contact Person	at ( 941 ) 650-5414  Area Code & Daytime Telephone Num		
Enclosed is a check t	or the following amount made	payable to the Florida Depo	artment of State:	
S35 Filing Fee	☐\$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)	
An Di P.C	niling Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee 8. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

LEFT COAST LANDCAPE, INC.

(Name of Corporation as currently filed with the Florida Dept. of State	)
P21000013754	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fits Articles of Incorporation:	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:	
LEFT COAST LANDSCAPE, INC.	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abl "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	breviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. 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	<del></del>
(Florida street address)	
New Registered Office Address:, Florida	
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the po	2021 J.J. 1
Signature of New Registered Agent, if changing	
Check if applicable	မှ 🖫

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	<u>\$</u>	
X Add	<u>sv</u>	Sally Smitt	<u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	ame_	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3 ) Change		<u> </u>	<u> </u>	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				<u></u>
Add				
Remove				
6) Change				
Add				
Remove				

(Attach add	<mark>ng or adding additio</mark> ditional sheets, if nece	ssary). Be spec	ific)			
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F. <u>If an ame</u>	ndment provides for	an exchange, recl	assification, or ca	incellation of issued	<u>shares,</u> If	
(if ne	nament provides for ns for implementing to ot applicable, indicate	N/A)	not Contained in	the amendment tox	<u></u>	
						<u></u>
-						
						<del></del>

The date of each amendment(s) ac	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and	i shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	
☐ The amendment(s) was/were approvided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	2021 J
"The number of votes cast	for the amendment(s) was/were sufficient for approval	2021 JUN - 1
by	(voting group)	-0
	(10)mg & only	PH (1)
05/24/2021		· ω
Dated	·	+
	warn Park	
	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ted fiduciary by that fiduciary)	
,,	Suzanne Park	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	