P21000020950

(Re	questor's Name)	
(,	
(Ad	dress)	
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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

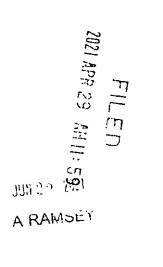
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JUN 22 2021 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: PAZ LAWN SERV	VICES INC	
DOCUMENT NUMI	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	TITO S. PAZ		
		Name of Contact Person	1
	PAZ LAWN SERVICES INC	C	
		Firm/ Company	
	11472 LAAKSO LN		
		Address	
	NAPLES FL 34114		
		City/ State and Zip Cod	e
	ODEAIR@HOTMAIL.COM	[
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	220	785-2750
	of Contact Person	at () 285-2759 de & Daytime Telephone Number
	r the following amount made		,
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address 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

Articles of Amendment Articles of Incorporation of

2021 APR 29 AM 11:59 (Name of Corporation as currently filed with the Florida Dept. of State)

PAZ LAWN SERVICES INC

P21000020950 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 (Florida street address) New Registered Office Address: (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 position.

Signature of New Registered 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)

Example:

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	\underline{PT}	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	ANGELA HERNANDEZ	11472 LAAKSO LN
X Add			NAPLES FL 34114
Remove			
2) Change	_		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

(Attach addition	or adding additional Ar mal sheets, if necessary).	(Be specific)			
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provisions fo (if not ap	nent provides for an exe or implementing the am opticable, indicate N/A) OVIDED AS FOLLOWS	endment if not <u>cor</u>	tion, or cancellati	on of issued shares ndment itself:	<u>5,</u>
BRIAN PAZ HEI	RNANDEZ WILL OBTA	AIN 20% OF SHA	RES		
TITO S. PAZ WI	LL OBTAIN 40% OF S	HARES			
ANGELA HERN	ANDEZ WILL OBTAI	N 40% OF SHARES	s		
		· ·			
<u>. </u>					
<u> </u>					
· ··					

	4/26/2021	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file do	ite)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirem partment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes east for the efficient for approval.	umendment(s)
	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amenda	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
bv		
· · · · · · · · · · · · · · · · · · ·	(voting group)	
4/26/2021 Dated		
Signature	Tito 83	
(By a di selected	ector, president or other officer – if directors or officers had by an incorporator – if in the hands of a receiver, trustee, or diffuciary by that fiduciary)	
	FITO S. PAZ	
•	(Typed or printed name of person signing)	
	VP	
•	(Title of person signing)	