## P21000047659

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SECRETARY OF STATE

A-Butler

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: L AND D RUFING	D LAWN AND LANDSCA	APING INC
	IBER: P21000047659		
The enclosed Article	s of Amendment and fee are su	hmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	LUIS A. RUFINO RAMIRE	Z	
		Name of Contact Person	1)
	A AND D RUFINO LAWN.	AND LANDSCAPING IN	C
		Firm/ Company	
	16277 SW 306TH ST		
		Address	
	HOMESTEAD FLORIDA 3.	3033	
	- <del></del>	City/ State and Zip Cod	e
	BIAROL@ATT.NET		
	14.	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
LUIS A. RUFINO R	AMIREZ	at (	650-5486
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount chade	payable to the Florida Dep.	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)
Ar Di P.o	nendment Section vision of Corporations  J. Box 6327 Hahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

L AND D RUFINO LAWN AND LANG	SCAPING INC.		2021 1114 -8 AM 8: 07
(Name)	of Corporation as curren	tly filed with the Florid:	a Dept. of State)
L AND D RUFINO LAWN AND LANI	SCAPING INC.		SECRETARY OF STATE
	(Document Number	of Corporation (if known	) TALLAHASSEE, FL
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corpora	tion adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	ı	
NA			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Torp," "Inc," or "Co".	A professional corpora	rated" or the abbreviation "Corp.," tion name must contain the word
D. Enter non-principal office address	if applicables	NA	
B. Enter new principal office address, (Principal office address MUST BE A S		<del></del>	
C. Enter new mailing address, if appl	icable:		
(Mailing address MAY BE A POST			
		NA	
		•	
D. If amending the registered agent ar			he name of the
new registered agent and/or the ne	w registered office addres	<u>is:</u>	
Name of New Registered Agent	LUIS A. RUFINO RAM	IREZ	
	16277 SW 306TH ST		
	(Florida s	treet address)	
New Registered Office Address;	HOMESTEAD		, Florida 33033
		(City)	(Zip Code)
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	erea ageni i am jamiliar	жин ана ассерство ооц	gations of the position.
	LUIS A lu Linu Signature of New	Ramirez	
	Signature of New	Registered Agent, if chan	ging
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	<u>PT</u>	<u>John Doe</u>	
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) X Change	PRES	LUIS A. RUFINO RAMIREZ	16277 SW 306TH ST
Add			HOMESTEAD, FL. 33033
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic (Attach additional sheets, if necessary). PLEASE AMEND INCORPORATOR TO:	les, enter change(s) here: (Be specific)
LUIS A RUFINO RAMIREZ	
	<u> </u>
	<del>-,,</del>
F. If an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
NA	

	01/2021
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
Effective date in approxime.	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does no document's effective date on the Department of	of meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (CH	ECK ONE)
The amendment(s) was/were adopted by the action was not required.	incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes east for the amendment(s) approval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the amen	ndment(s) was/were sufficient for approval
by NA	<b></b>
	ing group)
Dated 6/1/2021	Rufino Rumirez
(By a director, presi-	dent or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court
LUIS A RU	FINO RAMIREZ
	Typed or printed name of person signing)
PRESIDEN	Т
(	Title of person signing)