P210000 51107

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500372022025

RINGH TE SIP 02 III

COVER LETTER

•

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: LIMITED EDITIO	N LANDSCAPING INC		
DOCUMENT NUM				
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	ELEAZAR PADILLA BUEN	NO		
		Name of Contact Persor	1	
		Firm/ Company		
	34339 SOUTH HAINES CR	EEK ROAD		
		Address		
	LEESBURG, FL 34788			
		City/ State and Zip Code	2	
	KVILLALOBOS2728@GMA	AIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
ELEAZAR PADILLA	A BUENO	at (406-2820	
Name of Contact Person		at (352) 406-2820 Area Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LIMITED EDITION LANDSCAPING INC	•	2. 2.02
(Name of Corporation	on as currently filed with the	Florida Dept. of State)
P21000051107		
(Docum	nent Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Co	orporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "co "Inc" or Co" or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional c	scorporated" or the abbreviation "Corp"
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent	<u> </u>	
	(Florida street address)	
New Registered Office Address:	(Cuy)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		he obligations of the position.
Signe	tture of New Registered Agent,	if changing
60 N 6 N 1		

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>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	VP		MAYRA K MAYA CORTES	34339 SOUTH HAINES
Add				CREEK ROAD
X Remove				LEESBURG, FL 34788
2) Change				
Add				
Remove 3) Change		_	1000	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional	dding additional Arti sheets, if necessary).	(Be specific)	 .			
		1 = 11 11 - 11				
				•		
_						
				<u> </u>		
			_			
_						
<u>f an amendment</u>	provides for an exch	iange, reclassifi	cation, or cancel	lation of issued:	shares,	
provisions for in	nplementing the ame	ndment if not c	ontained in the 2	<u>imendment itsel</u>	<u>f:</u>	
(if not applic	cable, indicate N/A)					

The date of each amendment date this document was signed		, if other than the
Effective date if applicable:	08/00/2021	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this bepartment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/well action was not required.	re adopted by the incorporators, or board of directors without shareholder	action and shareholder
•	re adopted by the shareholders. The number of votes cast for the amendmere sufficient for approval.	nent(s)
	re approved by the shareholders through voting groups. The following start for each voting group entitled to vote separately on the amendment(s):	stement
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated	08/06/3031	
	By a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other	
	ppointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Title of person signing)	