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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: S & E RUBIO LA?	NDSCAPE AND MAINTE	NANCE, INC		
DOCUMENT NUMBI	ER:				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
S	aul Rubio Junco				
_	Name of Contact Person				
_		Firm/ Company			
_		Address			
_		City/ State and Zip Code	;		
For further information	E-mail address: (to be us	sed for future annual report	notification)		
Elizabeth baez		at (<u>305</u>	962-2270		
Name of	Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:		
■ \$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)		
Amer Divis P.O. I	ng Address Idment Section Ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

コメテ 心な	is land sails and maintenance tr
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	202
(Principal office address MUST BE A STREET ADDRESS)	
	<u> </u>
C. Enter new mailing address, if applicable:	89 로 프
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	
-	133.
Name of New Registered Agent	<u> </u>
(Florida s	areet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	nt:
I hereby accept the appointment as registered agent. I am familian	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)

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 Doe		
X Remove	\underline{V}	Mike Jone	<u>2S</u>	
X Add	<u>sv</u>	Sally Smi	<u>th</u>	
Type of Action (Check One)	<u>Title</u>	<u> 2</u>	<u>Same</u>	<u>Addres</u> s
1) X Change	p	s	saul rubio junco	29821 sw 169 ave homestead
Add				
Remove				
2) Change			140 - 10	
Add				
Remove 3) Change		_ -		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_ _ -		
Add				
Remove				
6) Change			·	
Add				
Remove				

	adding additional Ar al sheets, if necessary).	. (Be specific)			
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an amendme	nt provides for an exc implementing the an	change, reclassifi	cation, or cancell	ation of issued sl	nares,
if not ann	icable, indicate N/A)	renament if not c	ontained in the a	menument uşen.	1
(1 <i>y</i> 1)1 u pp	reasie; marcale (mil)				
			<u> </u>		.==
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The date of each amendment(s) ac	loption:	, 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 requirement partment of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without sharel	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the an fficient for approval.	nendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	ng statement nt(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated7	127/21 Chums	
Signature	rector, president or other officers if directors or officers have	not been
selected	d, by an incorporator - if in the hands of a receiver, trustee, or	
appoint	red fiduciary by that fiduciary)	
	Elizabeth Basy	
	(Typed printed name of person signing)	
	(Title of person signing)	