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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: YOURS WELCOM	ME LAWN AND GARDEN	N BY OSMANI NAVARRO		
	1BER: P21000099436				
	es of Amendment and fee are su	bmitted for filing.			
Please return all corn	espondence concerning this ma	tter to the following:			
	OSMANI NAVARRO TORI	RES			
	Name of Contact Person				
	YOURS WELCOME LAWN AND GARDEN BY OSMANI NAVARRO CORP				
		Firm/ Company			
	5209 MARTIN ST	, ,			
	Address				
	NAPLES, FL 34113				
	City/ State and Zip Code				
	ONAV968368@YMAIL.CO	² M			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	ion concerning this matter, plea	se call:			
OSMANI NAVARRO TORRES		at () 234-0571 de & Daytime Telephone Number		
Name	e of Contact Person	Area Code & Daytime Telephone Nu			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 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 to Articles of Incorporation of



YOURS WELCOME LAWN AND GARDEN BY OSMANI NAVARRO CORP

(Name of Corporation as currently	filed with the Florida Dept. of State)
P21000099436	</th
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Ilorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	The new pmpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
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 addresses new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et 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 the second sec	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

Check if applicable

 $[\]square$ 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 Doc				
X Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	VP	JOSE R. GARCIA	3620 OKECHOBEE ST			
X Add			NAPLES, FL 34112			
Remove						
2) Change						
Add						
Remove 3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

Attach a	ding or adding addition additional sheets, if necessity is necessity to the contract of the co	ssary). (Be sp	ecific)	_ _			
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f an an	nendment provides for	an exchange, ro	eclassification	, or cancellatio	on of issued sha	res,	
	ons for implementing not applicable, indicate		if not contair	ied in the ame	nament itself:		
							
	· · · · · · · · · · · · · · · · · · ·						
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				<u></u>		_	

	07/19/2022	
The date of each amendment(s) adoption date this document was signed.	on:	, if other thar
07/19/202 Effective date if applicable:	2	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Department.	does not meet the applicable statutory filing requirements, this date will nent of State's records.	ll not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the amendment(s) nt for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	2022
"The number of votes cast for th	e amendment(s) was/were sufficient for approval	Main in control at 12 2022 JUL 22 AM II: 2
by	(voting group)	2 6996
	,	全 (25)
07/19/2022		1: 2
DatedSignature	yano /	-J
(By a directo selected, by	r_president-or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court duciary by that fiduciary)	_
OSM	IANI NAVARRO TORRES	
	(Typed or printed name of person signing)	
PRE:	SIDENT	
	(Title of person signing)	

the

the