Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000060215 3)))



H220000602153ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : GARCIA GARCIA ASSOCIATES INC

Account Number : I20110000056 Phone : (305)823-9292

Fax Number : (305)824-0703

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

TEGER RYANDO COM

Email Address: FTCGI QYAhoo. Com

COR AMND/RESTATE/CORRECT OR O/D RESIGN DERAS LANDSCAPING, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

RECEIVED

022 FEB 15 PM 4: 1 SECRETANY OF STATE TALL AHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

Y SULKER FEB 1 6 2022

Articles of Amendment to Articles of Incorporation of

DERAS LANDSCAPING, CORP.	
(Name of Corporation as currently filed with the	Florida Dept. of State)
P22000002842	·
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit et Articles of Incorporation:	•
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional "chartered." "professional association," or the abbreviation "P.A."	incorporated" or the abbreviation "Corp.," 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)	
	022
D. If amending the registered agent and/or registered office address in Florida	t enter the hame of me
new registered agent and/or the new registered office address:	
Name of New Registered Agent	SSE TO
(Floridu street address)	— ST. 3
New Registered Office Address: (City)	Florida
New Registered Agent's Signature, if changing Registered Agent:	the Alientians of the position.
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent.	on the opinguions of the position.
Signature of New Registered Ago	ent, 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.

Example: X Change	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	one <u>s</u>	
X Add	<u>SV</u> <u>Sally S</u>	mith	
Type of Action	<u>Title</u>	Name	<u>Addres</u> s
(Check One)	T,D	DERAS, FELIX	191 E 44TH ST
1) Change			HIALEAH, FL 33013
Add			
XX Remove			
2)Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remové			
6) Change			
Add			
Remove		•	

<mark>if amending or adding additional Ar</mark> Attach <i>additional sheets, if necessary)</i>	icles, enter change(s) her (Be specific)	<u>e:</u>	
			
			
		·	
	La colfination	or concellation of issue	ed shares.
If an amendment provides for an e	change, reciassification, nendment if not containe	d in the amendment if	tself:
(if not applicable, indicate N/A)			
			 :
	_		
		-,	
			<u>. </u>
		·	

CANAGE.

	02/14/2022	, if other than the
The date of each amendment(s) adopted this document was signed.	ption:	
Effective date if applicable:	(no more than 90 days ofter amendment file date)	
Note: If the date inserted in this blod document's effective date on the Department.	ck does not meet the applicable statutory filing requirement artment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
action was not required.	ted by the incorporators, or board of directors without shareh	
by the shareholders was/were suff		
The amendment(s) was/were appromuss be separately provided for e	oved by the shateholders through voting groups. The following ach voting group entitled to vote separately on the amendment	ng statement nt(s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(100008 8.000)	
02/14/2022 Dated		
	200/1922	
selected	rector, president or other officer – if directors or officers have , by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	not been other court
	ROSA MENDEZ	
•	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	