RECENED

p.1



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.

(((H22000177652 3)))



H220001776523ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Ta:	Division - C.C.	<i></i>					
	Fax Number	•					
From:							
	Account Number Phone	• : <b>I20060000</b> 141 : (954)788-7400	NTING AND I	¥COME TAX ≦	SVCS CORP.		
ann:	ual report mai	ess for this busin lings. Enter only	ness entity one email	to be used address pl	for futu ease.**	فببعر	
	OR AMND/F	RESTATE/CORI	RECT OR	O/D RES	SIGN	81.	( <b>-</b> ,
1						Cor AH	, T
	Certificate of	Status		0	1		D
	Certified Cop	р <b>у</b>		0		20	
	Page Count			01	1		
	Estimated Cl	1210e		E76 00	i		
	Estimated Cl	44 <u>5</u> 0	11	333.00			
RNE	Esumated Cr			\$35.00	J		
	From: *Enter t ann ; Emai	Division of Co Fax Number From: Account Name Account Number Phone Fax Number *Enter the email addre annual report mai Email Address: COR AMND/F	Division of Corporations Fax Number : (850)617-6380 From: Account Name : EXPRESS ACCOUN Account Number : I20060000141 Phone : (954)788-7400 Fax Number : (954)366-5544 *Enter the email address for this busin annual report mailings. Enter only Email Address: COR AMND/RESTATE/COR VMP ALEGR Certificate of Status Certified Copy	Division of Corporations Fax Number : (850)617-6380 From: Account Name : EXPRESS ACCOUNTING AND IM Account Number : I20060000141 Phone : (954)788-7400 Fax Number : (954)366-5544 *Enter the email address for this business entity annual report mailings. Enter only one email Email Address: COR AMND/RESTATE/CORRECT OR VMP ALEGRE CORP Certificate of Status Certified Copy	Division of Corporations Fax Number : (850)617-6380 From: Account Name : EXPRESS ACCOUNTING AND INCOME TAX S Account Number : I20060000141 Phone : (954)788-7400 Fax Number : (954)366-5644 *Enter the email address for this business entity to be used annual report mailings. Enter only one email address pl Email Address: COR AMND/RESTATE/CORRECT OR O/D RES VMP ALEGRE CORP Certificate of Status 0 Certificate of Status 0 Certified Copy 0	Division of Corporations Fax Number : (850)617-6380 From: Account Name : EXPRESS ACCOUNTING AND INCOME TAX SVCS CORP. Account Number : I20060000141 Phone : (954)788-7400 Fax Number : (954)366-5544 *Enter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please.** Email Address: COR AMND/RESTATE/CORRECT OR O/D RESIGN VMP ALEGRE CORP Certificate of Status 0 Certificate Of Status 0 Certifica	Division of Corporations Fax Number : (850)617-6380 From: Account Name : EXPRESS ACCOUNTING AND INCOME TAX SVCS CORP. Account Number : I20060000141 Phone : (954)788-7400 Fax Number : (954)366-5544 *Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: Email Address: COR AMND/RESTATE/CORRECT OR O/D RESIGN VMP ALEGRE CORP Certificate of Status 0 Certificate of Status 0 Certified Copy 0

## May 18 22.04:02p INTEREXPRESS

**COVER LETTER TO:** Amendment Section Division of Corporations NAME OF CORPORATION: \_\_\_\_\_ DOCUMENT NUMBER: P22000035815 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANIBAL QUINTAO Name of Contact Person Firm/ Company 3927 N FEDERAL HWY Address POMPANO BEACH/ FL / 33064 City! State and Zip Code EACLIENTS@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANIBAL QUINTAO at (<sup>561</sup>) 9296899 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **\$43.75 Filing Fee &** □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

	Articles of Amendment	202 TAL
	to Articles of Incorporation	
	of	
VMP ALEGRE CORP		ARY SSE
(Name of Corpora	ation as currently filed with the Florida Dept.	
P22000035815		
(Doct	ument Number of Corporation (if known)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Pursuant to the provisions of section 607.1006, Flori ts Articles of Incorporation:	ida Statutes, this <i>Florida Profit Corporation</i> ade	pts the following amendme
A. If amending name, enter the new name of the VMP ALEGRE NURSERY CORP	corporation:	
name must be distinguishable and contain the word "	"corporation," "company," or "incorporated" of	The new r the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association." or the abb B. <u>Enter new principal office address, if applicab</u>	c," or "Co". A professional corporation nar previation "P.A." ple:	r the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association," or the abb B. <u>Enter new principal office address, if applicab</u> Principal office address <u>MUST BE A STREET Af</u>	c," or "Co". A professional corporation nar previation "P.A." <u>DDRESS</u> )	r the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association." or the abb B. <u>Enter new principal office address, if applicab</u> (Principal office address <u>MUST BE A STREET Af</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE B</u>	c, or "Co". A professional corporation nar previation "P.A." <u>DDRESS</u> ) <u>ROX</u> )	r the abbreviation "Corp.," me must contain the word
"Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association." or the abb B. <u>Enter new principal office address, if applicab</u> (Principal office address <u>MUST BE A STREET Af</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE B</u>	c, " or "Co". A professional corporation nar previation "P.A." <u>DDRESS</u> ) <u>ROX</u> ) <u>Lered office address in Florida, enter the name</u>	r the abbreviation "Corp.," me must contain the word
"Inc.," or Co.," or the designation "Corp," "Inc "chartered," "professional association." or the abb B. <u>Enter new principal office address, if applicab</u> (Principal office address <u>MUST BE A STREET AE</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE B</u> D. <u>If amending the registered agent and/or regist</u>	c, " or "Co". A professional corporation nar previation "P.A." <u>DDRESS</u> ) <u>ROX</u> ) <u>Lered office address in Florida, enter the name</u>	r the abbreviation "Corp.," me must contain the word
<ul> <li>"Inc.," or Co.," or the designation "Corp," "Inc.," or the constraint of th</li></ul>	c, " or "Co". A professional corporation nar previation "P.A." <u>DDRESS</u> ) <u>ROX</u> ) <u>Lered office address in Florida, enter the name</u>	r the abbreviation "Corp.," me must contain the word
<ul> <li>"Inc.," or Co.," or the designation "Corp," "Inc.," or the Corp," "Inc.," or the abb</li> <li>"chartered," "professional association." or the abb</li> <li>B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET AL</u>)</li> <li>C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>)</li> <li>D. <u>If amending the registered agent and/or registered agent and/or registered</u></li> </ul>	c, " or "Co". A professional corporation nar previation "P.A." <u>DDRESS</u> ) <u>BOX</u> ) <u>lered office address in Florida, enter the name</u> <u>d office address:</u> (Florida street address)	r the abbreviation "Corp.," me must contain the word

р.З

9543665644

May 18 22,04:02p INTEREXPRESS

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(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:

<u>X</u> Change	<u>PT</u>	John Doe	
<u>X</u> Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			
Add			
Remove			
2) Change	<u>-</u>		
Add			·····
Remove 3) Change			•
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
51 Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
ல் Change			
Add			
Remove			

-----

## E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

----

\_\_\_\_

------

p.5

vlay 18 22,04:02p li	NTEREXPRESS	9543665644	р.6
The date of each ame date this document wa			, if other than th
Effective date if appl	licable:		
	(no more t	than 90 days after amendment file date)	
Note: If the date inse document's effective of	erted in this block does not meet the date on the Department of State's reco	applicable statutory filing requirements, this date will rords.	ot be listed as the
Adoption of Amendn	nent(s) (CHECK ONE	)	
The amendment(s) action was not requ		rs, or board of directors without shareholder action and s	hareholder
	was/ware adopted by the shareholder	s. The number of voics cast for the amendment(s)	
	's was/were sufficient for approval.		
by the shareholder.	s was/were sufficient for approval. was/were approved by the shareholde	ers through voting groups. The following statement led to vote separately on the amendment(s):	
by the shareholder The amendment(s) must be separately "The number	is was/were sufficient for approval. was/were approved by the shareholde provided for each voting group entitler of votes cast for the amendment(s) w	led to vote separately on the amendment(s): as/were sufficient for approval	
by the shareholder The amendment(s) must be separately "The number	s was/were sufficient for approval. was/were approved by the shareholde provided for each voting group entitl	led to vote separately on the amendment(s): as/were sufficient for approval	
by the shareholder The amendment(s) must be separately "The number	rs was/were sufficient for approval. was/were approved by the shareholde provided for each voting group entitl of votes cast for the amendment(s) w (voting group)	led to vote separately on the amendment(s): as/were sufficient for approval	
by the shareholder The amendment(s) must be separately "The number	s was/were sufficient for approval. was/were approved by the shareholde provided for each voting group entitl of votes cast for the amendment(s) w (voting group) 05/18/2022	led to vote separately on the amendment(s): as/were sufficient for approval	
by the shareholder.  The amendment(s) must be separately "The number by Date	s was/were sufficient for approval. was/were approved by the shareholde provided for each voting group entitle of votes cast for the amendment(s) w (voting group) 05/18/2022 ed	led to vote separately on the amendment(s): as/were sufficient for approval	
by the shareholder.  The amendment(s) must be separately "The number by Date	rs was/were sufficient for approval. was/were approved by the shareholde provided for each voting group entitl of votes cast for the amendment(s) w (voting group) 05/18/2022 ed	led to vote separately on the amendment(s): as/were sufficient for approval 	
by the shareholder.  The amendment(s) must be separately "The number by Date	rs was/were sufficient for approval. was/were approved by the shareholde <i>provided for each voting group entitl</i> of votes cast for the amendment(s) w (voting group) 05/18/2022 ed	led to vote separately on the amendment(s): as/were sufficient for approval 	
by the shareholder.  The amendment(s) must be separately "The number by Date	s was/were sufficient for approval. was/were approved by the shareholde provided for each voting group entitle of votes cast for the amendment(s) w (voting group) 05/18/2022 ed	led to vote separately on the amendment(s): as/were sufficient for approval 	
by the shareholder.  The amendment(s) must be separately "The number by Date	s was/were sufficient for approval. was/were approved by the shareholde provided for each voting group entitle of votes cast for the amendment(s) w (voting group) 05/18/2022 ed	led to vote separately on the amendment(s): as/were sufficient for approval	