P22 000 041 120

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to raining Officer.				



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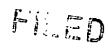
CT 1/29/2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Cultivated Assitant. Inc					
DOCUMENT NUMBER: P22000041120					
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
	Kaylin Bustin				
_	<u> </u>	Name of Contact Perso	n		
	The Cultivated Assistant, Inc				
_		Firm/ Company			
4	1651 SW Citrus Blvd				
_		Address	-		
	Palm City, FL 34990				
_		City/ State and Zip Cod	e		
ı	aylinbustin@gmail.com				
<u>-</u>		sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Kaylin Bustin		at (_ 772			
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	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)		
Amer Divisi P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Ameno Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of



	2022 NOV - 2
(Name of Corporation as c	2022 NAY -2 AH 7: 31
P22000041120	SECUL STATE TALL STATE STATE
(Document Nu	imber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutons Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporat	tion:
Citizens Hardscapes, Inc	The new
	ion," "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	ce address in Florida, enter the name of the
 If amending the registered agent and/or registered offi- new registered agent and/or the new registered office a 	
new registered agent and/or the new registered office a	
new registered agent and/or the new registered office a Name of New Registered Agent	
Name of New Registered Agent	address:

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

____ Add

Please now 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 Doe X Remove V Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Name Address (Check One) 1) ____ Change Michael Blum 6454 SW Busch St X Add Palm City, FL 34990 Remove 2) ____ Change ____ Add Remove 3) ____ Change Add Remove 4) ____ Change ____ Add Remove 5) ____ Change Add Remove 6) ____ Change

. <u>If amending or a</u> (Attach additional	adding additional Articles, enter change(s) here: I sheets, if necessary). (Be specific)
•	
Jpdate/Add IRS Em	ployer Identificaiton Number- 88-2351179
	Please add our tax ID number at time of
	name change # 88-2351179
	- SEE OHOLLACO - IRS FORMS
-	
If an amendment	provides for an exchange, reclassification, or cancellation of issued shares,
(if not applied	nplementing the amendment if not contained in the amendment itself: able, indicate N/A)
-	
_	
	
_ <u> </u>	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: (no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the appl document's effective date on the Department of State's records.	icable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. T by the shareholders was/were sufficient for approval.	he number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/w	ere sufficient for approval
by	
by(voting group)	
Dated10 28 22	
Signature Kaylu Bustim	
(By a director, president or other off	icer – if directors or officers have not been
selected, by an incorporator – if in t appointed fiduciary by that fiduciar	he hands of a receiver, trustee, or other court
Vall	· · · · · · · · · · · · · · · · · · ·
(Timed or prints	I name of person signing)
	ident
(Title of person s	igning)