

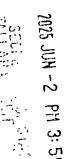
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	NC			
DOCUMENT NUMBER:	P220000	76124		
The enclosed Articles of Amendme	ent and fee are su	bmitted for filing.		
Please return all correspondence co	oncerning this ma	tter to the following:		
	S	ANDRA L MONCADA		
	Name of Contact Person			
	.	Firm/ Company		
	4	50 S OLD DIXIE HWY S	TE 4	
		Address		
JUPITER, FL 33458				
		City/ State and Zip Cod	e	
For further information concerning	; this matter, pleas	se call:at (561	506-6766	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the followi	ng amount made	payable to the Florida Depa	artment of State:	
	75 Filing Fee & ficate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section		Amend	Address Iment Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee FL 32314		2415 N. Monroe Street Suite 810		

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

BENNETT LANDSCAPE SERVICES INC

(Name of Corporation as currently filed with the Florida Dept. of State) P22000076124 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co,," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) _. Florida_ New Registered Office Address: (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar 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)

Example:

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	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	JIMENEZ, JOSE MARTIN	1104 KRISS LN		
Add			JUPITER, FL 33458		
X Remove 2) Change	VP	SHEYLA D. CORDERO NAJERA	1104 KRISS LN		
X Add			JUPITER, FL 33458		
Remove 3) Change					
Add					
Remove					
4) Change	·				
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

<u>[amending or adding additional</u> attach <i>additional sheets, if necesso</i>	ry). (Be specific)		
• =			
			
-		 -	•
			
		<u> </u>	
			
			- .
		···	<u>.</u>
If an amendment provides for an	exchange, reclassification, o	or cancellation of issued sha	ares,
provisions for implementing the (if not applicable, indicate N/.	<u>amenument it not contained</u> 4)	in the amendment usem:	
(ly ma apparente, menetic ma	• •		

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	doption:	, if other than th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file d	(ate)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirent partment of State's records.	nents, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☑ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the ifficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The followed voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
05/26/201 Dated	25 A 1	
	irector president or other officer – it directors of officers had, by an incorporator – if in the hands of a receiver, trustee.	
appoin	ted fiduciary by that fiduciary)	
	SANDRA I. MONCADA	
	(Typed or printed name of person signing)	
	SECRETARY	
	(Title of person signing)	