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(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	BENNETT L	ANDSCAPE SERVICES I	NC	
DOCUMENT NUMBER:	P2	2000076124		
The enclosed Articles of Amenda	nent and fee are su	bmitted for filing.		
Please return all correspondence o	oncerning this ma	atter to the following:		
		SANDRA L MONCADA		
		Name of Contact Person)	
		Firm/ Company		
	4	50 S OLD DIXIE HWY ST	TE 4	
	_	Address		
JUPITER, FL 33458				
		City/ State and Zip Code		
For further information concernin SANDRA L MONCADA	g this matter, plea	se call: at (506-6766	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the follow	ing amount made	payable to the Florida Depa	artment of State:	
	.75 Filing Fee & ificate 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		Street Address Amendment Section 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

 \mathbf{of}

BENNETT LANDSCAPE SERVICES INC

(Name of Corporation as currently	filed with the Florida Dept. of State)		
P220000761	124		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>E</i> its Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amendme	nt(s) to
A. If amending name, enter the new name of the corporation:			
		The new	
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."	ompany," or "incorporated" or the abbi- professional corporation name must	eviation "Corp.," contain the word	ı
B. Enter new principal office address, if applicable:	1104 KRISS LN		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	JUPITER, FLORIDA 33458		
		202	
		<u> </u>	٠٠, ŋ
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		`55 —	
(maining diddress <u>MAY DEST OF OT CICL DOS</u>)		-TO	٠
			•
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D. If amending the registered agent and/or registered office addre		9	
new registered agent and/or the new registered office address:			
Name of New Registered Agent			
(Florida stre	et address)		
New Registered Office Address:	, Florida	(Zip Code)	
<i>'</i>	City)		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the pos	ition.	

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)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change	VP	CORDER	O NAJERA, SHEYLA D	1104 KRISS LN	
Add				JUPITER, FL 33458	
X Remove					
2) Change		_			
Add					
Remove 3) Change					
Add				 .	
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			
Add					
Remove					_

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f an amendment provides for an exc provisions for implementing the ame	hange, reclassific	ation, or cancell	ition of issued sha	res,	
provisions for implementing the and	endment it not co	majnea m me a	nendment usen.		
(if not applicable, indicate N/A)					
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The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Dec alor day te another block	08/11/2025	
Effective date <u>if applicable</u> :	(no more than 90 days after amendmen	ı file date)
Note: If the date inserted in this b document's effective date on the Do	lock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast flicient for approval.	for the amendment(s)
	proved by the shareholders through voting groups. To each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for approv	ral
by		
<u></u>	(voting group)	
08/11/2025 Dated	Vin A.	
selecte	irector, president or other-officer – if directors or offi d. by an incorporator – if in the hands of a receiver, the ded fiduciary by that fiduciary)	
	SANDRA L MONCADA	
	(Typed or printed name of person signing	(3)
	SECRETARY	
	(Title of person signing)	