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(Document Number)				
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations						
NAME OF CORPORATION: HEAVENLY GREEN Landscape Lawn Pare & I RRIGATION CURP						
DOCUMENT NUMBER: <u>\$23,000,06082</u>						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Jose Manyel Perer 7 Carrandi Name of Contact Person Heavenly Green Landscape Lawn Care & Innigation Comp Firm Company 4102 Sharbeth Da W						
-) GCKSON VILLE, FLX 32210 City/ State and Zip/Code						
E-mail address (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Contact Person at (904) 4/26 - 5312 Area Code & Daytime Telephone Number						
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 Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee						

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation

Heavenly Green Lawn Care Lundscape & I prigation inc.						
(Name of Corporation as currently filed with the Florida Dept. of State)						
P130000608Z						
(Document Number of Corporation (if known)						
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:						
A. If amending name, enter the new name of the corporation: Hervenly Green Landscape Lawn Care & IRrigation Corp. The new						
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) Jackson ville, Fly, 322/0						
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 4201 Shapbeth De w - Lacksonville, Fla, 32210						
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)						
New Registered Office Address:						
(City) (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)

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: XChange	<u>P.L</u>	John Do	<u>u</u>			
X Remove	<u>V</u>	Mike Joi	ies			
 X Add	_ <u>SV</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>		Name	Address		
1) Change						
Add						
Remove						
2) Change						
Add						
Remove 3) Change		_				
Add						
Remove						
4) Change	-					
Add						
Remove						
5) Change						
Add						
Remove						
δ) Change						
Add						
Remove						

amending or adding additional Articles ttach additional sheets, if necessary). (I	Be specific)
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exchan	nge, reclassification, or cancellation of issued shares, lment if not contained in the amendment itself:
(if not applicable, indicate N/A)	mient if not contained in the amendment risen.

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after a	mendment file date)
Note: If the date inserted in this blo document's effective date on the Department.		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of direc	tors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of voicient for approval.	otes cast for the amendment(s)
	oved by the shareholders through voting gach voting group entitled to vote separate	
"The number of votes cast fo	or the amendment(s) was/were sufficient f	or approval
by	(voting group)	
	(voting group)	
selected,	period president or other officer if directed by an incorporator – if in the hands of a red fiduciary by that fiduciary)	eceiver, trustee, or other court
	(Typed or printed name of person	ener Cannandi
	(Typed or printed name of person	on signing)
	owner	
	(Title of person signing)	