## PZ3000095067

(Re	equestor's Name)	<del></del>
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(Bı	usiness Entity Name	·)
(Do	ocument Number)	
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S. PRATHER

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: SUNSET LAWN S	SERVICES AND IRRIGAT	TION INC			
DOCUMENT NUM	P23000085067					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	ALVARADO WENCES, OC	TAVIANO				
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	<u> </u>			
	SUNSET LAWN SERVICES AND IRRIGATION INC					
		Firm/ Company				
	1739 ALISON DR					
	Address					
	WEST PALM BEACH, FL 33409					
		City/ State and Zip Code	2			
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
OCTAVIANO ALVA	ARADO WENCES	at (	255-7059			
Name	of Contact Person	at ( Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303			

Articles of Am	endment	<del>,</del> []	2024
to Articles of Inco	rnoration	*	<u>.</u>
of	i poi atton		<del>}==</del>
SUNSET LAWN SERVICES AND IRRIGATION INC		(/. (*)	
	filed with the Florida Dept. of State)	:	=
P23000085067		<u>:</u> :	Ċ
(Document Number of (	Corporation (if known)	17.7	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	lorida Profit Corporation adopts the follow	wing amend	iment(s) to
A. If amending name, enter the new name of the corporation:			
SUNSET LAND SERVICES AND IRRIGATION INC		The r	
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."	mpany," or "incorporated" or the abbrevi professional corporation name must con	ation "Corp tain the w	v.,'' vord
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 addressed new registered agent and/or the new registered office address:  Name of New Registered Agent	ss in Florida, enter the name of the		- - -
(Florida stree	t address)	_	
New Registered Office Address: (C	, Florida(Z)	ip Code)	_
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a signature of New Registered applicable	th and accept the obligations of the position	n.	
☐ 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)

Add

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: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		<del>-</del>		
Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				-
Remove				-
4) Change		_		
Ađd				
Remove				
5) Change		_		
Add				
Remove				
6) Change		<del></del> -		

mon mannonth sheets	s, if necessary).	cles, enter change (Be specific)				
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					<u>_</u>	
n amendment provid	des for an excha	inge, reclassificat	<u>ion, or c</u> ancella	tion of issued s	hares,	
ovisions for impleme (if not applicable, in	enting the amen	dment if not cont	ained in the an	<u>nendment itself</u>	<u>:</u>	
у пог аррисиоте, п	nature WA)					
				-		
			_			
		<del></del>	<del></del> _	<del></del>	<del></del> -	

	06/01/2024	
The date of each amendment(s) adopti	on:	, if other than the
date this document was signed.		
06/01/202	24	
Effective date if applicable:	free moves the confidence of t	<del>-,</del>
	(no more than 90 days after amendment file day	e)
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes cast for the a ent for approval.	mendment(s)
	I by the shareholders through voting groups. The follow voting group entitled to vote separately on the amendm	
"The number of votes cast for th	e amendment(s) was/were sufficient for approval	2024 JUL Ale 11/4
bv	,,,	,- <u>`</u>
	(voting group)	· · · · · · · · · · · · · · · · · · ·
		₩ <b>-</b>
06/06/2024		F. P.
Dated		<del>,</del>
Signature CCT	Hiano AL	5: <b>4</b> 1
(By a directo selected, by	r, president or other officer – if directors or officers have an incorporator – if in the hands of a receiver, trustee, or fuciary by that fiduciary)	
ALV	ARADO WENCES, OCTAVIANO	
	(Typed or printed name of person signing)	
OW	NER	
	(Title of person signing)	<del></del>