P9700000336

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	1
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To a constant



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Freund Flowerin	g Trees, Inc.
DOCUMENT NUMBER: P97000001336	
The enclosed Articles of Amendment and fee are	submitted for filing.
	natter to the following:
Patricia Freund	
Freund Flowering Trees, is	Name of Contact Person
	Firm/ Company
1500 SW Rodgers Ave	
Arcadia, FL 34266	Address
	City/ State and Zip Code
sales@freundfloweringtrees.com	1
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Patricia Freund	786 402-7698
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	le payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \$\Certificate of Status\$	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

01	
poration as currently filed with the Florida Dept	t. of State)
Document Number of Corporation (if known)	
Florida Statutes, this Florida Profit Corporation as	dopts the following amendment(s) to
the corporation:	
	The new
Corp," "Inc," or "Co". A professional corpore or the abbreviation "P.A."	orated" or the abbreviation
egistered office address in Florida, enter the nar	ne of the
, (Fibrial Sirect dataress)	
(City)	, Florida
ng Registered Agent: ngent. I am familiar with and accept the obligation	T T T T T T T T T T T T T T T T T T T
	Document Number of Corporation (if known) Florida Statutes, this Florida Profit Corporation as word "corporation," "company," or "incorporation and the word "corporation," "company," or "incorporation and the abbreviation "P.A." Sicable: GE BOX) (Florida street address) (Florida street address) (City) The Registered Agent: The appearance of the obligation of the abbreviation and the profit Corporation and the profit

address of each Officer (Attach additional sheets, Please note the officer/dii P = President: V= Vice	and/or D if necess rector titl President	irector being eary) e by the first : r: T= Treasur	added: letter of the office title: er: S= Secretary; D= Director; TR=	er/director being removed and title, name, and = Trustee: C = Chairman or Clerk; CEO = Chief
held. President, Treasure Changes should be noted	r, Directo in the fo wes the c	or would be F llowing mann orporation, S	TD. er. Currently John Doe is listed as t ally Smith is named the V and S. The	re than one title, list the first letter of each office he PST and Mike Jones is listed as the V. There is use should be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	! <u>.me</u> 	<u>Addres</u> s
1) Change	s	Je	ssica Cabrera	24105 SW 113 Passage
Add				Homestead, FL 33032
Remove				
2) Change	Т	В	andon Freund	24105 SW 113 Passage
Add				Homestead, FL 33032
Remove				
3) Change				
Add		-		
Remove				
4) Change				
Add				<u> </u>
Remove				
5) Change				
Add				
Remove				
O Chanca				
6) Change				
Add Remove			 	
KCIIIOVC			<u> </u> '	

Attach additional sheets, if necessary).	(Be specific)
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-	
If an amendment provides for an exch	nange reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<u> </u>
	<u> </u>

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does r document's effective date on the Department of	ot meet the applicable statutory filing requirements, this date will not be listed as the State's records.
Adoption of Amendment(s) (Cl	 <u>ECK ONE</u>)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the arne	ndment(s) was/were sufficient for approval
by	
(vo	ting group)
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
09/15/2017 Dated	
Signature Patilui	Fruid
(By a director, presselected, by an inc	ident or other officer – if directors or officers have not been officer – if in the hands of a receiver, trustee, or other court by that fiduciary)
Patricia Fr	 cund
	(Typed or printed name of person signing)
Secretary/I	Oilector
	(Title of person signing)