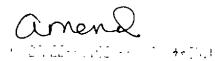
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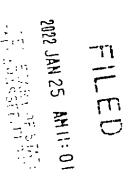
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COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: HOGH JOHNSON LAWOSCAPE ACCHITECTURE, INC.

DOCUMENT NUMBER: P9700021604 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HIGH JOHNSON
Name of Contact Person HIGH JOHNSON LANDSCAPE ARCHOTECTURE, INC 6125W 4th AVENUE FORT LANDORDAY FL 33315
City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: HUGH JOHNSON at (954) 249-1136

Name of Contact Person Area Code & Davtime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & S52.50 Filing Fcc Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations

> The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2022 JAN 25 AMIL: 0

Hug H			ARCHITECTURE		1
	(<u>Name</u>	of Corporation as current		Dept. of State).	
		P97000		<u> </u>	
		(Document Number of	f Corporation (if known)	
Pursuant to the prov ts Articles of Incorp		.1006, Florida Statutes, this	Florida Profit Corporat	ion adopts the following	; amendment(s) t
A. If amending na	me, enter the new n	ame of the corporation:			
	<u> </u>		_ _		The new
"Inc.," or Co.," of	r the designation "(n the word "corporation," " Corp," "Inc," or "Co". " or the abbreviation "P.A.	A professional corporat		
	cipal office address, Idress <u>MUST BE A S</u>	if applicable: STREET ADDRESS)		.	
•				-	
	lling address, if appless MAY BE A POST				
					
		nd/or registered office add w registered office addres:		e name of the	
Name of N	ew Registered Agent				
		(Florida st	reet address)		
New Regist	tered Office Address:			Florida	
			(City)	(Zip C	ode)
New Registered Ag hereby accept the	zent's Signature, if c appointment as regis	thanging Registered Agent tered agent. I am familiar	i: with and accept the oblig	gations of the position.	
	<u></u>	Signature of New I	Registered Agent, if chan	ging	
		y ,	3 ,,	er ser	

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 Doc	
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	P	HUGH JOHNSON	CIZSW 4TH ANT
Add			FORT LANDORDANE, FL
Remove			33315
2) Change	<u>P</u>	HUGH JOHN SON TIE JOHNSON SCOTT TRUST A 9/21	6125W 4TH ANE
Add		Downson aroll 1857, \$ 4151	FORT LAUDORDALE, FL
Remove 3) Change			<u>3331</u> 5
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific)				
					
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an amend	ment provides for an	exchange, reclassif	ication, or cancella	tion of issued shar	<u>es,</u>
as a sail a f	for implementing the ipplicable, indicate N/	amendment if not o	contained in the ar	<u>rendment itself:</u>	
FOVISIONS	applicable, indicate N/	/A)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not me document's effective date on the Department of State	et the applicable statutory filing requirements, this date will not be listed as the s records.
Adoption of Amendment(s) (CHECK	ONE)
The amendment(s) was/were adopted by the incoraction was not required.	orators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	nolders. The number of votes cast for the amendment(s) val.
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grou	cholders through voting groups. The following statement of entitled to vote separately on the amendment(s):
"The number of votes east for the amendment	nt(s) was/were sufficient for approval
by	··
(voting g	oup)
Dated 1-21-9	<u> </u>
Signature Hus	hun
(By a director, president	or other officer – if directors or officers have not been
selected, by an incorpor appointed fiduciary by	tor - if in the hands of a receiver, trustee, or other court
, .	
Hugh J	HWSON AS CO-TRUSTEE OF JOHNSON-SCOTI TRUST d or printed name of person signing) DATED 09 121 121
(Тур	d or printed name of person signing)
Pe	31DENT
	of person signing)

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