PIUMSUS 13

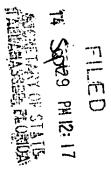
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COVER LETTER

NAME OF CORPORATION: Brevard Lawn And Tree Inc

DOCUMENT NUMBER: P 1400055573

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher J Aris

Name of Contact Person

Brevard Accumpting Group

Firm/ Company

160 Forstenberry Rd Sunk A

Address

Marritt Tshad F1 32952

City/ State and Zip Code

CDD BAG-CPA-Com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

5 Filing Fee

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$43.75 Filing Fee &

Certificate of Status

Street Address

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment

	FILE		
14	Sep29	PH 12:	17

	Articles of Incorporation of	14 36 A29 PH 12: 17
Brevard LAWN And TI	ree Inc	APERITALY OF STATE.
(Name of Corporation as curre	ently filed with the Florida Dept. of State)	A VICENCIA SOURCE EFFORIGM
P14000U50573		****
(Document Num	nber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corpora	tion adopts the following amendment(s)
A. If amending name, enter the new name of	the corporation:	
Southeast LAWN And	Tree Inc	<i>771</i>
name must be distinguishable and contain the		The new
word "chartered," "professional association," B. Enter new principal office address, if app (Principal office address MUST BE A STREE	licable:	
		
C. Enter new mailing address, if applicable:	:	
(Mailing address MAY BE A POST OFFIC		
-		
 If amending the registered agent and/or r new registered agent and/or the new registered. 		he name of the
Name of New Registered Agent		
rume of their Registered rigem		
	(Florida street address)	<u> </u>
New Registered Office Address:	. F	'lorida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		eations of the nosition
. Hereby accept the appointment as registered a	1 am jammar with and accept the oot	_Б инона ој те розтоп.
Signatur	re of New Registered Agent, if changing	
5.6)	

date this document was signed.	
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
]	(voiing group)
	pted by the board of directors without shareholder action and shareholder
action was not required.	
	pted by the incorporators without shareholder action and shareholder
action was not required.	
Dated 9-	25-14 //
	HAT
Signature (By غصفه	rector, president a other officer - if directors or officers have not been
selected	d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Christopher J Davis
	(Typed or printed name of person signing)
	CBA
	(Title of person signing)