# 538771

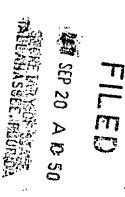
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# **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: BRUCE PEST CONTROL INC.
DOCUMENT NUMBER: 53877/
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRUCE HOLDORFF
Name of Contact Person
BRUCE PEST CONTROL INC
Firm/ Company
100 SUUT/A Ka.
AVELAND EL 33809
City/ State and Zip Code
6 1/2/2020 === 0 2
E-mail address: (to be used for future annual report notification)
2 man addition (to so asset for parallel annual report not not not not not not not not not no
For further information concerning this matter, please call:
BRUCE /HOLDORFF at (863) 581-7827
Name of Contact Person 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 & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed)  □\$43.75 Filing Fee & Certified Copy (Additional Copy (Additional Copy

### **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

is enclosed)

# **Articles of Amendment**

to

### **Articles of Incorporation**

(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) 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 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) 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

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name / A	Address
1) Change		<i>N/A</i>	
Add		/	A-4-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
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4) Change			
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Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
N/A
•
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
(y not applicable, inalcale 1771)
/¥/ <i>f</i> }

The date of each amendment(s) adop	tion:	. /^		, if other than the
date this document was signed.				
Effective date if applicable:		/ V/N		
	(no more the	an 90 days after ame	endment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the ap tment of State's record	oplicable statutory fi s.	ling requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adopte by the shareholders was/were suffice		The number of votes	s cast for the amendment(s)	
☐ The amendment(s) was/were approx must be separately provided for each	red by the shareholders ch voting group entitled	through voting groud to vote separately o	ps. The following statement on the amendment(s):	
"The number of votes cast for		/were sufficient for a	approval	
by				
	(voting group)			
The amendment(s) was/were adopted action was not required.	d by the board of direc	ctors without shareho	older action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators	without shareholder	action and shareholder	
9/16	-/17			
Dated /// D	<del>/                                    </del>	2/1/	//	
Signature	SUICE C.	1/bldock	K	
(By a dire			or officers have not been	<del></del>
	y an incorporator – if i fiduciary by that fiduc		eiver, trustee, or other court	
appointed	A a	(A)		
	BRUCE	E. HOLL	WRFF	
	(Typed or prin	nted name of person	signing)	
	PRE51DZ	ENT		
	r)	itle of person signing	g)	