P11000068816

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NA-31-11

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORP	ORATION:	Gulf Coast Lawn Service	, Inc
DOCUMENT NU	MBER:	P11000068816	
The enclosed Articl	es of Amendment and fee	are submitted for filing.	٠.
Please return all cor	respondence concerning th	is matter to the following:	
		Jason C Carter	
	1	Name of Contact Person	
_	Gulf C	Coast Lawn Service, Inc	
		Firm/ Company	
·		6717B Hwy 85 N Address	
	;	Audress	
		rel Hill, Florida 32567 City/ State and Zip Code	
		dcarter@gmail.com	
	E-mail address: (to be use	ed for future annual report notification)	
For further informat	ion concerning this matter,	please call:	
Jason Carter		at \	022222
	f Contact Person	Area Code & Daytime Tele	•
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	ment of State:
☑\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

Gulf Coast I	Lawn Service, Inc	da Dept. of State PETARY OF 37
(Name of Corporation as curre	ntly filed with the Flori	da Dept. of State
P110	000068816	LAHASSEE STATE
	ber of Corporation (if kn	da Dept. of State PETARY OF STATE own)
Pursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	, Florida Statutes, this I	Florida Profit Corporation adopts the following
A. If amending name, enter the new name of	the corporation:	
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof	designation "Corp," "Ir	ac," or "Co". A professional corporation
B. Enter new principal office address, if appl Principal office address <u>MUST BE A STREE</u> T		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u></u>	
. If amending the registered agent and/or renew registered agent and/or the new registered agent a		in Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street	address)
		, Florida
-	(City)	(Zip Code)
New Registered Agent's Signature, if changing the hereby accept the appointment as registered ag	g Registered Agent: gent. I am familiar with	and accept the obligations of the position.

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)

en J. Standridge		Remove Add
	enter change(s) here:	☐ Remove
	enter change(s) here:	
		
plementing the amendmen	e, reclassification, or cancellation on the amendm	
	ible, indicate N/A)	

The date of each amendment(s) adoption: 8/18/2011				
Effective date if applicable:	(date of adoption is required)			
(no	o more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.			
	oproved by the shareholders through voting groups. The following statement reach 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	,,,			
(vol	ting group)			
The amendment(s) was/were ad action was not required.	dopted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder			
Dated_8/18/20				
(By a di selecte	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ded fiduciary by that fiduciary)			
	Jason C Carter			
_	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			