## POS000115343

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AUG 0.7 2014

C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section Division of Corporations A-1 Stump Removal, INC. NAME OF CORPORATION: \_ P05000115343 DOCUMENT NUMBER: \_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Julie Van Wallendbel
Name of Contact Person At Dependable bookkeeping + Tax Service
Firm/Company 221 Pauls Drive Suite C Brandon, FL 33511 City/ State and Zip Code FlaTax Lady@aol.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Julic Van Wallendae Iat ( 813 ) 681-1099Name of Contact PersonArea Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State:

## Mailing Address

☐ \$35 Filing Fee

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 &

Certified Copy (Additional copy is

enclosed)

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

□\$52.50 Filing Fee Certificate of Status

Certified Copy
(Additional Copy

is enclosed)

Articles of Amendment to
Articles of Incorporation

20 1

poration That there is

<u>A-1</u>	Stump Remove	21, Iv	۵.		PH 2: 53	  -
(Name of Corp	Oration as currently filed w	vith the Flori	da Dept. of	State)	or propaga	<u>.</u>
	105000	71135	45	in second to the or		<del>-</del>
	(Document Number of Corp	ooration (if kn	own)			
Pursuant to the provisions of s its Articles of Incorporation:	ection 607,1006, Florida Stat	tutes, this <i>Flo</i>	rida Profit (	Corporation ado	pts the following	ig amendment(s) to
A. If amending name, enter	the new name of the corpor	ation:				
A-1 S	tump Grindin	a. In	c.			The new
name must be distinguishable "Corp.," "Inc.," or Co.," or word "chartered," "profession	the designation "Corp," "I	'ne,'' or "Co"	'. A profes.	" or "incorport sional corporati	ated" or the a ion name must	bbreviation contain the
B. Enter new principal office (Principal office address MUS		<u>-</u> -				-
		-				-
		-				~
C. Enter new mailing addre (Mailing address MAY BE						
(muning address MAT DE	A TOST OFFICE BOX	-				-
		_				-
		-				_
D. If amending the registere	d agent and/or registered of or the new registered office		in Florida,	enter the name	of the	
	· <del>-</del>	e augress:				
Name of New Register	red Agent					
		Florida street a	ddress)			
New Registered Office	Address:			, Florida		
<u></u>		(City)	•	, ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	(Zip Code)	-
New Registered Agent's Sign	ature if changing Registers	ed Agent				
I hereby accept the appointmen			and accept	the obligations o	of the position.	
	Signature of New Re	gistered Ager	t. if changir	167		

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.

Example: X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	V	Mike Jones	
X Add	$\underline{SV}$	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add Remove			
2) Change			
Remove			
3) Change	<u></u>		
Remove 4) Change			
Add Remove			
5) Change			
Add			
6) Change			
Add			

Attach additional sheets, if necessary).	(Be specific)	
		<del></del>
		_
		· <u>-</u>
		<del></del>
		<u> </u>
	a town as a substitute of the same of the	
nrovisions for implementing the ame	ange, reclassification, or cancellation of industrial i	ssued snares. it itself:
(if not applicable, indicate N/A)		<del></del>
		<u></u>

The date of each amendment(s) ad	option: 7 - 24 - 14	, if other than th
date this document was signed.		
Effective date if applicable:	7-24-14	
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes east for the amendment(s) dicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	7-24-14	
Signature	Lm WS	
(By a diselected	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Lee M. Hicks	
	(Typed or printed name of person signing)	
	President	
	(Title of pareon cianing)	