# P17 000058337

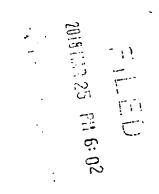
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#### **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: MONROE COUNTY ARBORIST INL DOCUMENT NUMBER: <u>\$\mathcal{P}\$ | 7000058337</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MICHAEL E. ST.AMOUR Name of Contact Person MONROE COUNTY ARBORIST FNL
Firm/Company 22049 NW 75TH AVE RD
Address MTCANOPY FLORFDA 31667

City/State and Zip Code MONROE ARBORIST & LOM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (35L) 792-9/85
Area Code & Daytime Telephone Number MICHAEL ST. AMOUR Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

### Articles of Amendment to

# Articles of Incorporation

of

# MONROE COUNTY ARBORIST, INC

(Name of Corporation as currently	filed with the Florid	la Dept. of State)	
P17000058337			
(Document Number of	Corporation (if knows	1)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corpord	ation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:			
BRIGHTER DAY ARBONIST	CHC		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "F	" "company," or " o". A professional	incorporated" or corporation name	the abbreviation must contain the
B. Enter new principal office address, if applicable:			·
(Principal office address <u>MUST BE A STREET ADDRESS</u> )			
			至 五 一
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 addresses new registered agent and/or the new registered office address:	ess in Florida, enter t	the name of the	
Name of New Registered Agent Mikell	Jarech	ogle	
720 N	W 22Nd	aire	<del>-</del>
(Florida stree	et address)		
New Registered Office Address: GaineSW	Je	, Florida	32609
(1)	City)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obt	ligations of the po	sition.
2/1/4			
Signature of New Re	gistered Agent, if cha	nging	

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> John	Doc	
X Remove	<u>V</u> <u>Mik</u>	2 Jones	
X Add	<u>SV</u> <u>Sally</u>	<u> Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) Change	<u>_C</u> _	mile ell ogve	720 KW ZZKJaUE Gainesville, Fl
_X_ Add			Gainesulle, Fl
Remove			32669
2) Change			<del>-</del>
Add			
Remove			
3 ) Change			
Add			· .
Remove			
4) Change		<u></u>	
Add			<del></del>
Remove			<del></del>
5) Change			
Add			<del></del>
Remove			
: 6) Change			
Add			
Remove			

E. <u>If amending</u> (Attach <i>additi</i>	or adding additional Ar onal sheets, if necessary).	ticles, enter change (Be specific)	e(s) here:		
(	, ,,	(γ 5)			
				<del></del>	
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F. If an amend	ment provides for an exc	hange, reclassifica	tion, or cancellatio	on of issued shares,	
prov <u>isions</u>	<u>for implementing the am</u>	endment if not con	tained in the amer	<u>idment itself:</u>	
(if not a	pplicable, indicate N/A)				
	-	<del></del>			
	. <del></del> -				
<u> </u>			****		
	<u>.</u>				
	<del>-</del> -	<del> </del>	<del></del>		

The date of each amendment(s) adoption:	, if other than the
-	
Effective date if applicable: TUESDAY MARCH 19 2019 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareh action was not required.	okler
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required.	г
Dated 3/19/2019	
Signature Michael Gt, amour	
(By a director, president or other officer – if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	court
MICHAEL ST. AMOUR	
MICHAEL ST. AMOUR (Typed or printed name of person signing)	
PRESTOENT	
(Title of person signing)	