I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: BENJAMIN D SMITH

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P05000110523

Entity Name: KODIAK TREE SERVICE, INC.

Current Principal Place of Business:

418 GOVERNMENT AVE VALPARAISO, FL 32580

Current Mailing Address:

418 GOVERNMENT AVE VALPARAISO, FL 32580

FEI Number: 68-0612877

Name and Address of Current Registered Agent:

SMITH, BENJAMIN D 1601 23RD STREET NICEVILLE, FL 32578 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:	BENJAMIN D SMITH			02/08/2014	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title F	PRESIDENT	Title	SECR		
Name S	SMITH, BENJAMIN D	Name	SMITH, KERRIE A		
Address	1601 23RD STREET	Address	430 DETROIT AVE		
City-State-Zip: N	NICEVILLE FL 32578	City-State-Zip:	VALPARAISO FL 32580		

Certificate of Status Desired: Yes

Date

02/08/2014

FILED Feb 08, 2014 Secretary of State CC0387114685