

517611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700062069017

12/15/05--01015--019 \*\*35.00

FILED

05 DEC 15 AM 11:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Amend + N/C

T BROWN DEC 27 2005

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SHAMROCK PEST CONTROL, INC.

**DOCUMENT NUMBER:** 517611

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALFRED W. TORRENCE, JR., ESQ.  
(Name of Person)

THORNTON & TORRENCE, P.A.  
(Name of Firm/ Company)

6645 RIDGE ROAD  
(Address)

PORT RICHEY, FL 34668  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Alfred W. Torrence, Jr. at ( 727 ) 845-6645  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

FILED  
05 DEC 15 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

SHAMROCK PEST CONTROL, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

517611

(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:

**NEW CORPORATE NAME (if changing):**

MOLL ENTERPRISES, INC.

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Article V: Registered Agent

The street address of the registered office of this  
corporation is and the name of the registered agent of this  
corporation at that address is: Alfred W. Torrence, Jr., Esq.  
6645 Ridge Road, Port Richey, FL 34668.

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: 7/19/05

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each 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 \_\_\_\_\_."  
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this \_\_\_\_\_ day of November, 2005.

Signature \_\_\_\_\_

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Kenneth Moll

(Typed or printed name of person signing)

President

(Title of person signing)

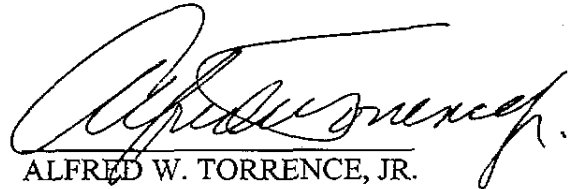
**FILING FEE: \$35**

**REGISTERED AGENT**

The corporation has named:

**ALFRED W. TORRENCE, JR., ESQ.**  
6645 Ridge Road  
Port Richey, FL 34668


as its registered agent to accept service of process within the State of Florida. I  
hereby am familiar with and accept the duties and responsibilities as registered agent.

  
ALFRED W. TORRENCE, JR.

STATE OF FLORIDA  
COUNTY OF PASCO

SWORN AND SUBSCRIBED to before me this 18 day of Nov.  
2005. Personally known or form of ID: personally known.



  
Notary Public- State of Florida

BARBARA A. REICH

Printed Name of Notary Public