G04066

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CURPU	RATION: THO TOAL	LANDSCAPE LA	AWN CARE, INC.
DOCUMENT NUMBER: G04066			
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	NATALIE M BUR	INC	
	INATALIE IVI BUN	· -	
	Name of Contact Person		
	NATALIE M BURNS PL		
	Firm/ Company		
	800 VILLAGE SQUARE CROSSING STE 337		
Address			
	PALM BEACH GARDENS FL 33410		
		City/ State and Zip Cod	e
NA	TALIE@BURNSL	AWFL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
For further information			, 267-0104
NATALIE BU		at (561) 267-0104 de & Daytime Telephone Number
NATALIE BU	JRNS	at (561 Area Co	de & Daytime Telephone Number
NATALIE BU	JRNS of Contact Person	at (561 Area Co	de & Daytime Telephone Number artment of State: \$52.50 Filing Fee Certificate of Status Certified Copy
NATALIE BUNAME Enclosed is a check f	of Contact Person or the following amount made \$43.75 Filing Fee & Certificate of Status enclosed)	at (561 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is (Additional Co	de & Daytime Telephone Number artment of State: \$\sum_{\text{S}52.50}\$ Filing Fee Certificate of Status Certified Copy is enclosed)
NATALIE BUNAME Enclosed is a check for \$35 Filing Fee	of Contact Person or the following amount made \$43.75 Filing Fee & Certificate of Status	at (561 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	de & Daytime Telephone Number artment of State: \$\sum_{\text{\$52.50}} \text{Filing Fee} \text{Certificate of Status} \text{Certified Copy} \$\text{Copy}\$
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NATALIE BUNAME Enclosed is a check for \$35 Filing Fee Market Am Division P.C.	of Contact Person or the following amount made \$43.75 Filing Fee & Certificate of Status enclosed) filing Address tendment Section vision of Corporations 0. Box 6327	at (561 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is (Additional Copy) Street Amend Division Clifton	de & Daytime Telephone Number artment of State: \$52.50 Filing Fee Certificate of Status Certified Copy fopy is enclosed) Address Iment Section on of Corporations Building
NATALIE BUNAME Enclosed is a check for \$35 Filing Fee Market Am Division P.C.	of Contact Person or the following amount made \$43.75 Filing Fee & Certificate of Status enclosed) tiling Address endment Section vision of Corporations	at (561 Area Co payable to the Florida Depa \$43.75 Filing Fee & Certified Copy (Additional copy is (Additional Co Street Amend Division Clifton 2661 E	de & Daytime Telephone Number artment of State: \$52.50 Filing Fee Certificate of Status Certified Copy sopy is enclosed) Address Iment Section on of Corporations

Articles of Amendment to Articles of Incorporation of

TROPICAL LANDSCAPE LAWN CARE, INC.

(Name of Cornection of		·		
G04066	s currently filed with the Florid	ia Dept. of State)		
	nt Number of Corporation (if known	own)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flor</i>	ida Profit Corporation a	idopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co"	. A professional corpor	porated" or the ab	The new obreviation contain the
B. Enter new principal office address,		_		
(Principal office address MUST BE A S	TREET ADDRESS)			
	_			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)				
	-			
D. If amending the registered agent an new registered agent and/or the new	w registered office address:	in Florida, enter the na	me of the	
Name of New Registered Agent	LEWIS, GREG		_	
	17586 BONIELL		_	
	(Florida street a	•	22406	
New Registered Office Address:	BOCA RATON (City)	, Florida	33496 (Zip Code)	
	(Cliv)		(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist Signature.			ns of the position. –	
			···□⇒∽cc₩U∀∃	7 4 1

Page 1 of 4

SECKETT V OF STATE

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FILED

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Change Add X Remove	Р	LEWIS, GARY	17586 BONIELLO DR BOCA RATON FL 33496
2) Change Add	VP	LEWIS, JILL C.	17586 BONIELLO DR
X Remove 3) Change X Add Remove	P	LEWIS, GREG	BOCA RATON FL 33496 17586 BONIELLO DR BOCA RATON FL 33496
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)
 	
If an amondment provides for an evol	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: AUGUST 1, 2013	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.
	by the shareholders through voting groups. The following statement of the 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)
_	y the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder
_{Dated} August 1,	2013
selected, by a	presideby or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court aciary by that figure ary)
	RY LEWIS
<u>un</u>	(Typed or printed name of person signing)
PRI	ESIDENT
	(Title of person signing)