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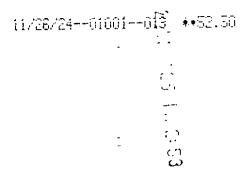
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Ron Shoster post Control INC.
DOCUMENT NUMBER: 6 28/80
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rin Shuster
Ron Shute pet Control
Firm/ Company 125 Oak Lake D.
Firm/ Company 125 Oak Lake D., Address Spring hill Flouida 34608 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (352) 279 509 Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
Sas Filing Fee Sassantial Section of Status Certificate of Status (Additional copy is enclosed) Sassantial Section of Status Certificate of Status (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 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to : Articles of Incorporation

Ron Shuster pest (Control Inc
(Name of Corporation as current)	y filed with the Florida Dept. of State)
tursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(
Ron Shuster Enterprize	Corporation The new
ame must be distinguishable and contain the word "corporation," "(Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	company, "or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
Enter new principal office address, if applicable:	125 oak Lake di.
Principal office address MUST BE A STREET ADDRESS)	Springhill Florida
	34608
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	125 oak Lahed. Springhill Florida 34608
	Springhill Florida
· · · · · · · · · · · · · · · · · · ·	34608
If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	ress in Florida, enter the name of the
Name of New Registered Agent	
125 oah	Lake Ju
New Registered Office Address: Spring h	:11 Florida 34608
	(City) (Zip Code)
New Registered Office Address: Spring h	(City) Florida 346° (Zip Code)
hereby accept the appointment as registered agent. I am familiar w	vith and accept the obligations of the position.
Signature of New Re	egistered Agent, if changing
heck if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (a) Es

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: XChange	<u>PT</u>	John Dog	<u>e</u>				
X Remove	<u>V</u>	Mike Jor	<u>nes</u>	no	cho	inges	
_X Add	<u>sv</u>	Sally Sm	<u>iith</u>				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s	
1) Change		_			_		
Add							
Remove					-		
2) Change		_		 	_ ,		
Add							
Remove 3) Change		_			-		
Add							
Remove							
4) Change		_			_		
Add							
Remove					,		
5) Change		_			_		
Add							
Remove							
6) Change		_					
Add							
Remove							

(Attach additional	Iding additional Articles, e sheets, if necessary). (Be :	nter change(s) her enacific)	<u>'e</u> :		
(Attach adamonar s	sneets, if necessary). (ne s		12		
		·	None		
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F. If an amendment	provides for an exchange,	reclassification, o	r cancellation of is	sued shares,	
provisions for im	nplementing the amendmenable, indicate N/A)	nt if not contained	in the amendmen	t itself;	
(у пот аррисс	unte, mateate 1974)				
**					
					-
					· <u>-</u>

The date of eac	h amendment(s) a	111424 111424	, if other than the
date this docume			
	-	11/14/24	
Effective date <u>i</u>	f applicable:	(no more than 90 days after amendment file o	
		(no more than 90 days after amenament fue o	aate)
		block does not meet the applicable statutory filing require epartment of State's records.	ments, this date will not be listed as the
Adoptjon of An	mendment(s)	(<u>CHECK ONE</u>)	
The amendm action was no		opted by the incorporators, or board of directors without sh	areholder action and shareholder
	• .	opted by the shareholders. The number of votes east for the ufficient for approval.	e amendment(s)
	·	proved by the shareholders through voting groups. The folion reach voting group entitled to vote separately on the amend	
"The m	umber of votes cas	t for the amendment(s) was/were sufficient for approval	
by			
·		(voting group)	
	Dated	11/14/24 Ron Short	
	<u></u>	Raffet	
	selecte	irector, president or other officer – if directors or officers held, by an incorporator – if in the hands of a receiver, trustee ited fiduciary by that fiduciary)	
		(Typed or printed name of person signing)	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	



November 6, 2024

RONALD SHUSTER 125 OAK LAKE DR. SPRINGHILL, FL 34608

SUBJECT: RON SHUSTER PEST CONTROL, INC.

Ref. Number: G28180

We have received your document for RON SHUSTER PEST CONTROL, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a RESOLUTION OF THE BOARD OF DIRECTORS TO CHANGE THE ALTERNTE NAME FOR USE IN FLORIDA, but your entity is a FLORIDA PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 724A00024415

Anissa Butler Regulatory Specialist II

www.sunbiz.org