FILED Jul 23, 2002 8:00 am Secrétary of State DOCUMENT # G81488 1. Entity Name 07-23-2002 90332 007 ***150.00 WEILAND'S TREE SERVICE, INC. Mailing Address Principal Place of Business P.O. BOX 1046 H0131434 870 W. INDUSTRIAL AVE. BOYNTON BEACH FL 33425-1046 BAY #5 **BOYNTON BEACH FL 33426** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2368097 Not Applicable Zip \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WEILAND, ELLEN Street Address (P.O. Box Number is Not Acceptable) 2540 SW 14TH ST. BOYNTON BCH. FL 33426 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Election Campaign Financing Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Change **PVT** ☐ Delete TITLE TITLE WEILAND, RONALD R. NAME STREET ADDRESS 2540 SW 14TH STREET STREET ADDRESS CITY-ST-7IP **BOYNTON BEACH FL** CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME WEILAND, ELLEN 2540 SW-14TH STREET. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL** ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-17-02

(56) 734-078-3 Daytime Phone # Wir Dan Dis Tree Jewice Inc. Attachment 68/488 P.O. Box 1046 Bayner Bch; FL 33425-1046 7-17-02 561)734-0983 Office Phan 561)369-3639 fax Our company did not receive a prior notice for UBR for Division of Corporation. We did have a change in business Name this year which may be a factor. New name is consisten UBR. ! Thank you for your attention to this mattu Sincuely -Secretary of Corporation