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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	TERSON'S QUA	ALITY LAWN SERVICE,	INC			
DOCUMENT NUMBER: K2934			<u></u>			
The enclosed Articles of Amendme	nt and fee are su	bmitted for filing.				
Please return all correspondence co	neerning this ma	tter to the following:				
CHRISTOPE	HER DAVIS, CP	A				
		Name of Contact Persor	1			
BREVARD.	ACCOUNTING	GROUP, CPAs, PA				
		Firm/ Company				
150 FORTE	NBERRY ROAL	VILLA A				
		Address				
MERRITT IS	SLAND, FLORE	DA 32952				
,		City/ State and Zip Cod	e			
F-mail:	iddress: (to be us	ed for future annual report	notification)			
C Hamilton	icarean. To the ac	od for fattire tilliam report				
For further information concerning	this matter, pleas	se call:				
CHRISTOPHER DAVIS		at (, 452-5061			
Name of Contact Pe	rson	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following	ig amount made	payable to the Florida Dep	artment of State:			
	5 Filing Fee & icate 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 Sect	ion	Street Address Amendment Section				
Division of Corpu P.O. Box 6327		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 of

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TETERSON'S QUALITY LAWN SERVICE, INC.		
(Name of Corporation as curre	ently filed with the Florida I	Dept. of State)
K29341		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his <i>Florida Profit Corporatio</i>	n adopts the following amendment(s
A. If amending name, enter the new name of the corporation	<u>:</u>	
		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	. A professional corporatio	ed" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		N
		923
C. Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)		So a m
		1917) <u>— — — — — — — — — — — — — — — — — — —</u>
		<u></u>
		TH. #
D. If amending the registered agent and/or registered office a		name of the
new registered agent and/or the new registered office add	ress:	
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·	 .
(Floride	a street address)	
New Registered Office Address:		. Florida
	(Ciţi)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili		tions of the position
r nerco, accept the appointment as regimered agent. Tam jamin	ar min and decept the orniga	nons of the position.
Signature of Ne	w Registered Agent, if changi	ng —————
Check if applicable		
☐ The amendmen(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	

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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
_X Add	<u>SV</u> Sal	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VIYT	DANA PETERSON	1680 ROCHELL PKWY
X Add		-	MERRITT ISLAND, FL 32952
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ing additional Art ects, if necessary).	(Be specific)			
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<u>ran amenument pr</u>	ovides for an exch	lange, reclassificatio	on, or cancellation of ined in the amendm	issued shares.	
	le, indicate N/A)	nument ii not conta	med in the amendm	em ngen:	
(if not applicable					
(if not applicable					
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	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		<u>.</u>
	(no more than 90 days after amendment file (date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing require Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sh	archolder action and shareholder
The amendment(s) was/were by the shareholders was/were	idopted by the shareholders. The number of votes east for the sufficient for approval.	e amendment(s)
	approved by the shareholders through voting groups. The following group entitled to vote separately on the amend	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	<u></u>	
	(voting group)	
Dated	3-31-2023	
Signature		
(By selection)	director, president or other officer – if directors or officers heted, by an incorporator – if in the hands of a receiver, trustee inted fiduciary by that fiduciary)	
	JARRELL PETERSON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	