## K32131

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SECRETARY DEST

## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

NAME OF CORPORATION: Dees Trees, Inc				
DOCUMENT NUMBER: K 32131				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Sandras B. Jones Name of Contact Person				
Name of Contact Person				
Dees Trees, Inc Firm/Company				
Firm/ Company				
13238 Barwick Road Address				
Address				
Delray Beach, Fl. 33445  City/State and Zip Code				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
17-mail address. (to be dised for future annual report nonneation)				
For further information concerning this matter, please call:				
Sandra B. Jones :11561, 436-1411				
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:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303				

## Articles of Amendment to Articles of Incorporation αf



Dees Trees, Inc.	SECRETARY OF STAN
(Name of Corporation as currently	filed with the Florida Dept. of State)
K 32131	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u>N/A</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent NA	
(Florida stree	n uddress)
New Registered Office Address: NA	, Florida
, c	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
N/A Signature of New Reg	gistered Agent, if changing

Check if applicable
The amendment(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	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones ,	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PD	Jones, Howell, R	13238 Barwick Rd
Add			Delogy Bon. Fl
Remove			33445
2) Change	<u>D</u>	Jones, Howell R. Jr.	4649 Suncise Blvd
Add		•	Delray Beach, Fl
Remove Change	<b>D</b> _	Kirk, Jennifer Dec	33445 17453 47 CT Porth
Add			Loxahatchee F-1
X Remove			33470
4) Change		Jones, John T	13288 Barwick Rd
Add	_		Delray Bry Fl
Remove			33145
5) Change	V <u>D</u>	Jorgs Samme	13008 Carwer Shi
Add			Delray Bearn. Il
Remove			33415
6)Change	PD	Jones Eardro	13238 Garmer 2
/Add	·	<u>.</u>	Cherry Form
Remove			(-211)=

If amending or adding additional. (Attach additional sheets, if necessar	ry). (Be specific)
$\Lambda \cup \Lambda$	
<u> </u>	
	•
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f an amendment provides for an o	exchange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A	amendment if not contained in the amendment itself:
J 6	•
YF:	
·	

•

The date of each amendment(s) adoption: M//	if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 do	ys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or boar action was not required.	d of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
L! The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes east for the amendment(s) was/were su	ifficient for approval
by NA	
(voting group)	<del></del>
Dated 1/21/2022	
Signature Lander B.	lones
(By a director, president or other officer)	if directors or officers have not been
selected, by an incorporator – if in the har	ds of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
Sandra B	Jones
(Typed or printed name	of person signing)
	· ·
(Title of person signing	)