164924

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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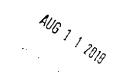
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COVER LETTER

<u>COVER LETTER</u>	
TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: TREE KING TREE FARM INC.	
DOCUMENT NUMBER: K64924	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
GERARD L'HEUREUX	
Name of Contact Person TREE KING TREE FARM INC Firm/Company	
5113 Mile StretcH DR.	
HOLIDay FL 34690	
City/ State and Zip Code treeking 1 e verizon, Net E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Serged L'Heyreux at (727) 244-8914 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:	
S35 Filing Fee S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment Section	

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

TREE KING	TREE FARM	Inc	1 4
(Name o	f Corporation as currently filed	d with the Florida Dept.	of State)
K	104924		· 85
	(Document Number of Corp	oration (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this <i>Florid</i>	la Profit Corporation add	opts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ition "Corp," "Inc," or "Co".		
B. Enter new principal office address, i (Principal office address MUST BE A ST			
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O			
D. If amending the registered agent and new registered agent and/or the new		Florida, enter the name	e of the
Name of New Registered Agent	GERARD L'	Heureux Stata V Do	
	O [13 U.C. \ (Florida street add	JLKCULY DK	•
New Registered Office Address:	Holiday	·	Florida 34690
	(City)		(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>S Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	· Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	ROSIER SHANNON	P.O. BOX 12158
Add V Remove		,	TALLAHASSCE, FL 32311
2)	CEO.P	Michael L'Heyrcyx	5113 Mile Stretcy DR Holiday FL
Remove 3)ChangeAdd			34690
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

	ecessary). (B	e specific)			
					
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f an amendment provides t	for an exchang	e reclassificatio	n, or cancellation	n of issued shares.	
	ng the amendm	ent if not conta	ined in the amen	dment itself:	
provisions for implementi					
provisions for implementing (if not applicable, indic	ate iv/A)				
<u>provisions for implementi</u>	zate 197A)				
<u>provisions for implementi</u>	<u></u>				
<u>provisions for implementi</u>		. 			
<u>provisions for implementi</u>			_		
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<u>provisions for implementi</u>	:ate 1974)				
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<u>provisions for implementi</u>	:ate 1974)				
<u>provisions for implementi</u>	cate IN/A)				
<u>provisions for implementi</u>	cate IV/A)				
<u>provisions for implementi</u>	cate IN/A)				

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
in more man 20 days ages amenanchi yie datey	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stands to be separately provided for each voting 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)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	holder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated	
Dated 8-4-18 Signature Gerard L. Hurung	
(By a director, president or other officer - if directors or officers have not	
selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	r court
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	