## PWW000080355

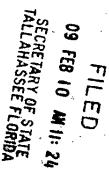
| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT - MAIL                     |
|   |
| (Business Entity Name)                  |
| (Dusiless Littly Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
|   |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
| ·                                       |
| ·                                       |
| ,                                       |
|   |
|   |

Office Use Only



100141439361

01/26/09--01038--012 \*\*52.50





## **COYER LETTER**

| Division of Corporations  |
|---|
| NAME OF CORPORATION: PRECISION LANDSCAPING & TRAPATION OF VOLUSIA                             |
| DOCUMENT NUMBER: <u>P000000</u> 80355   |
| The enclosed Articles of Amendment and fee are submitted for filing.                          |
| Please return all correspondence concerning this matter to the following:                     |
| TOHN STONER (Name of Contact Person)  |
| PRECISION/ANDSCAPING TERRIGATION OF VOLUSIA TWC   |
| 45 CAPISTRANO DRIVE (Address)   |
| ORMOND BEACH Flore DA 32176 (City/ State and Zip Code)  |
| For further information concerning this matter, please call:                                  |
| Solver at (386) 383-6667  (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: |

**Mailing Address** 

\$35 Filing Fee

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

\$43.75 Filing Fee &

Certificate of Status

**Street Address** 

enclosed)

**\$43.75** Filing Fee &

(Additional copy is

Certified Copy

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

\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2009

JOHN STONER 45 CAPISTRANO DR ORMOND BEACH, FL 32176

SUBJECT: PRECISION

CONSTRUCTION & SITE SERVICES

INCORPORATED

Ref. Number: P00000080355

We have received your document for PRECISION CONSTRUCTION & SITE SERVICES INCORPORATED 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 name you are wanting to change your corporate name to is the current name.

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) 245-6927.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 709A00003867

SECRETARY OF STATE TALL AHASSEE, FLORIDA

2009 FEB 10 AM 8: 00

BECEINED

## Articles of Amendment to Articles of Incorporation of

| TRECISION CONST   | RUCTIONS   | ISITE SER   | VICES INC   |
|---|--|---|---|
| (Name of Corporation as cur   | rrently filed with t   | he Florida Dept. of St                                | ate)  |
| P000000   | 80355  | <del></del>   |   |
| (Document No  | umber of Corporati   | on (if known)   |   |
| Pursuant to the provisions of section 607.10 following amendment(s) to its Articles of Inc.   |  | es, this <i>Florida Profit</i>                        | Corporation adopts the  |
| A. If amending name, enter the new name   | of the corporation   | <u>ı:</u> .   |   |
| PRECISION CONSULTIAN The new name must be distinguishable "incorporated" or the abbreviation "Corp., "Co". A professional corporation na association," or the abbreviation "P.A."  B. Enter new principal office address, if a (Principal office address MUST BE A STRE | ," "Inc.," or Co.,<br>ime must contain<br>SAME<br>pplicable: | " or the designation the word "chartered"  45 CAPIS/K | "Corp," "Inc," or<br>d," "professional<br>PAND DRIVE<br>BEACH |
| C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)  |  | FLORIDA   | <u> 32176</u>   |
| D. If amending the registered agent and/o new registered agent and/or the new re  Name of New Registered Agent:   |  |   | ter the name of the   |
| New Registered Office Address:  | (Flori   | da street address)                                    | <del></del>   |
| Now Designated Amentle Signature if shows   | naina Dogistanad A   | (City)  | , Florida(Zip Code)   |
| New Registered Agent's Signature, if chan I hereby accept the appointment as register position.   |  |   | pt the obligations of the                                     |
| _   |  | Registered Agent, if ch                               | anging 25 A   |
|   | Page 1 of 3  |   |   |

| Name  | Address  | Type of Action  |
|---|--|---|
| DEBORAH STONER  | 45 CAPISTRANU DA<br>ORMOND BEACH<br>ELOKIDA 32176                            | Add Remove  |
| Cony Stoner   | US CAPISTRAND DRIVE<br>ORMOND BEACH<br>ELORIDA 32176                         | Add Remove  |
|   |  | Add Remove  |
|   |  |   |
|   |  |   |
| endment provides for an exchange, re  | classification, or cancellation of iss<br>f not contained in the amendment   | ued shares,<br>itself:  |
| endment provides for an exchange, re<br>is for implementing the amendment if<br>applicable, indicate N/A) | classification, or cancellation of iss<br>f not contained in the amendment i | ued shares.<br>itself:  |
|   | DEBORAH STONER  CORY STONER  | DEBORAH STONER 45 CAPISTRANO DA<br>ORMOND BEACH<br>ELORIDA 32176<br>CORY STONER 45 CAPISTRANO DRIVE<br>OVERTOND BEASH |

. If amending the Officers and/or Directors, enter the title and name of each officer/director being

| The date of each amendment(                          | s) adoption: 1-23-09  |
|--|---|
|  | 1-23-09 (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                             | (CHECK ONE)   |
| The amendment(s) was/wer by the shareholders was/we  | e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.  |
| The amendment(s) was/wer must be separately provided | e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes of                              | east for the amendment(s) was/were sufficient for approval  |
| by JOHN K  | (voting group)  |
| The amendment(s) was/wer action was not required.    | re adopted by the board of directors without shareholder action and shareholder   |
| The amendment(s) was/wer action was not required.    | e adopted by the incorporators without shareholder action and shareholder   |
| Dated/_  | 23-09   |
| (By sele   | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
|  | TOHN R STONEY  (Typed or printed name of person signing)  |
|  | Ples IDENT  |
|  | (Title of person signing)   |