| P01000032746  |   |  |
|---|---|--|
| (Requestor's Name)<br>(Address)<br>(Address)                                | 400369529804  |  |
| (City/State/Zip/Phone #)  | **************************************              |  |
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2021 0CT 18 PH 1: 43 FLORIDA DEPARTMENT OF STATE . Division of Corporations

August 2, 2021

JASON SHAW 320 EXECUTIVE BLVD LEESBURG, FL 34748 US

SUBJECT: BENJIE'S LAWN SERVICE, INC. Ref. Number: P01000032746

We have received your document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

There is a fee of \$10.00 due.

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) 245-6050.

Jasmine N Horne Regulatory Specialist II

Letter Number: 521A00018105

Somp-F Dalnet veceive Letter until Michagust

Enclosed de# 2091 \$10.00

www.sunbiz.org

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## COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORF         | PORATION:   |
|----------------------|---|
| DOCUMENT NU          | P0100032746   |
| The enclosed Artic   | les of Amendment and fee are submitted for filing.  |
| Please return all co | prrespondence concerning this matter to the following:  |
|                      | Jason Shaw  |
|                      | Nume of Contact Person  |
|                      | Benjie's Lawn Service   |
|                      | Firm/ Company   |
|                      | 320 Executive Blvd  |
|                      | Address   |
|                      | Leesburg, FI 34748  |
|                      | City/ State and Zip Code  |
|                      | zoysiagreen@hotmail.com   |
|                      | E-mail address: (to be used for future annual report notification)  |
| For further inform   | ation concerning this matter, please call:  |
| Jason Shaw           | at ( <u>352</u> ) <u>323-8454</u>   |
| Nai                  | me of Contact Person Area Code & Daytime Telephone Number   |
|                      | k for the following amount made payable to the Florida Department of State:<br>$\Box \in C$ 75 Filling For $B = \Box \in C$ 75 Filling For $B = \Box \in C$ 57 50 Filling For |

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) U\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

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

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Articles of Amendment to

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FILED

|   | Articles of Incorporation<br>of                                  | 2021 OCT 18 AM 12: 43   |
|---|--|---|
| Benjie's Lawn Service, Inc  | 171  | SECRETARY OF STATE  |
| ( <u>Name</u> )   | of Corporation as currently filed with the Florida               | TALLAHASSEE. FLEET  |
| P01000032746  |  |   |
|   | (Document Number of Corporation (if known)                       | )   |
| Pursuant to the provisions of section 607.<br>Is Articles of Incorporation:   | 1006, Florida Statutes, this <i>Florida Profit Corporat</i>      | <i>ion</i> adopts the following amendment(s) to                       |
| A. If amending name, enter the new n  | ame of the corporation:  |   |
|   |  | The new   |
| ame must he distinguishable and contain<br>"Inc.," or Co.," or the designation "C<br>"chartered." "professional association." |  | ated" or the abbreviation "Corp.,"<br>tion name must contain the word |
| B. <u>Enter new principal office address</u> ,<br>(Principal office address <u>MUST BE A S</u> )                              | <u>if applicable:</u><br><u>TREET ADDRESS</u> )                  |   |
|   |  |   |
|   |  |   |
|   | jeal de-   |   |
| (Mailing address <u>MAY BE A POST</u>   | <u>OFFICE BON</u> ;  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   | nd/or registered office address in Florida, enter th             | he name of the  |
| new registered agent and/or the ne  |  |   |
| Name of New Registered Agent  | Jason Shaw   | ······································                                |
|   | 320 Executive Blvd   |   |
|   | (Florida street address)   |   |
| New Registered Office Address:  | Leosburg   | 34748<br>. Fiorida  |
| <u>New Regimeren (ance anness</u> ,   |  | (Zip Code)  |
|   |  |   |
|   |  |   |
| New Registered Agent's Signature, if c  | hanging Registered Agent:  |   |
|   | ered agent - I am femiliar with and accept the oblig             |   |
| Lisn  | FL Haw Registered Spon of Some Registered Spon of Some           |   |
| (1)   | <ul> <li>Kiphatare of New Registered Agent, if change</li> </ul> | ging  |
| 'heek if applicable   | •./  |   |

 $\square$  The anomalocultist is are being died parsault to scattering 0.0 (0) 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:

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(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 = <math>V

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 Chapge

| <u>X</u> Change               | $\overline{\mathbf{b}}$ | <u>John Dog</u>   |                    |
|-------------------------------|-------------------------|-------------------|--------------------|
| X Remove                      | <u>V</u>                | Mike Jones        |                    |
| <u>_X</u> Add                 | <u>sv</u>               | Sally Smith       |                    |
| Type of Action<br>(Check One) | <u>Title</u>            | Name              | <u>Addres</u> s    |
| Li Change                     | Р                       | Benjamin W Yarish | 320 Executive Blvd |
| Add                           |                         |                   | Leesburg, FI 34748 |
| XRemove                       |                         |                   |                    |
| 2) Change                     |                         |                   |                    |
| Add                           |                         |                   |                    |
| Remove 3) Change              |                         |                   |                    |
| AdJ                           |                         |                   | <u></u>            |
| Remove                        |                         |                   |                    |
| 4) Change                     |                         |                   |                    |
| Add                           |                         |                   | <u> </u>           |
| Remove                        |                         |                   |                    |
| 5) Change                     |                         |                   | ······             |
| Add                           |                         |                   |                    |
| Remove                        |                         |                   |                    |
| 4)Change                      |                         |                   |                    |
| Add                           |                         |                   | ··                 |
| Remove                        |                         |                   |                    |

| uach additional sheets, if necessary)  | i <u>eles, epter change(s) here</u> :<br>(Be specific)  |
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| an amendment provides for an evel  | hange, reclassification, or cancellation of issued shares.<br>endment if not contained in the amendment itself: |
| (if not applicable, indicate N'A)  | and ment in not contained in the amendment user.  |
| ( <i>j</i> , <i>i</i> , <i>i</i> , <i>i</i> , <i>j</i> , <i>i</i> |   |
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| • • •   | • • •  |                        |
| The date of each amendment(s) add date this document was signed.  | ption:   | , if other than the    |
| Effective date <u>if applicable</u> :   | ino more than 90 days after amendment file date)   |                        |
|   | ino more than 90 days after amendment file date)   |                        |
| Nore: If the date inserted in this blo<br>document's effective date on the Dep  | ek does not meet the applicable statutory filing requirements, this date wil<br>artment of State's records.  | ) not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )   |                        |
| The amendment(s) was were adop<br>action was not required.  | ted by the incorporators, or bourd of directors without shureholder action and   | shareholder            |
| The amendment(s) was/were adop<br>by the shareholders was were self   | ted by the shareholders. The number of votes cast for the amendment(s)<br>ficient for approval.  |                        |
| The amendment(s) was/were approximately provided for each separately pr | ived by the shareholders through coding groups. The following statement<br>ach voting group entitled to vote separately on the amendment(s)  |                        |
| "The number of votes cast fe  | or the amendment(s) was/were sufficient for approval   |                        |
| by  | (voting group)   |                        |
|   | (voting group)   |                        |
| / sefected.   | 21<br>on M. Maw<br>cetor, president or other officer - if directors or officers have not been<br>by an incorporator - if in the hands of a receiver, trustee, or other court<br>d fiduciary by that fiduciary) |                        |
| j   | Jason Shaw   |                        |
| -   | (Typed or printed name of person signing)  |                        |
|   |  |                        |
| Ň   | VP   |                        |

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