## P01000067643

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

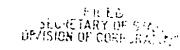
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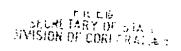
## COVER LETTER

TO: Amendment Section Division of Corporations 2018 AUG 15 AM 11: 26

NAME OF CORPORATION	)N: Marsala Pest (	Control, Inc.	
DOCUMENT NUMBER:	P01000067643		
The enclosed Articles of An	endment and fee are su	bmitted for filing.	
Please return all correspond	ence concerning this ma	tter to the following:	
		Anthony G.Bossone	
		Name of Contact Person	1
		Anthony G.Bossone, P.	Α.
		Firm/ Company	
		PO Box 2194	
		Address	
	i	Palm Harbor, FL 34682-2	2194
		City/ State and Zip Cod	e
	i-mail address: (to be u	sed for future annual report	notification)
	, man anarom, 110 00 m	to ter tours united to	
For further information conc	erning this matter, pleas	se call;	
	/ G. Bossone	at (	789-9004 )
Name of Cor	tact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the f	following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	343.75 Filing Fee & Certificate 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 A			Address
Amendme	nt Section  £ Corporations	Amendment Section Division of Corporations	
P.O. Box			Building
	e, FL 32314		Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



2010 AUG 15 AM 11: 26

arsala Pest Control, Inc.

( <u>Name o</u>	f Corporation as curren	tly filed with the Florida Dept, of State)
	P01000	067643
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
"Corp.," "Inc.," or Co.," or the designa-	ition "Corp," "Inc," or	The new fon," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "PA"
word "chartered," "professional association," or the abbreviation " B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		990 Lexington Drive
		Dunedin, FL 34698
		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		990 LexingtonDrive
		Dunedin,FL 34698
D. If amending the registered agent and new registered agent and/or the new		
Name of New Registered Agent		
	990 Lexington Drive, E	Ounedin, FL 34698
	(Florida s	treet address)
990 Lexington Drive, E		eunedin 34698 , Florida
Men Megisterett Confee Marriage.		(City) (Zip Code)
New Registered Agent's Signature, if che thereby accept the appointment as registe	red agent. I am familiai	nt:  with and accept the obligations of the position.  Robert A. Hear Registered Agent, if changing

Page 1 of 4

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: XChange	PT Jo	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	DPST	Robert A. Heup	990 Lexington Drive
XX Add			Dunedin, FL 34698
Remove			
2) Change	DPST	Frank Marsala	281 Whisper Lake Road
Add			Palm Harbor, FL 34683
XX Remove			
3 ) Change			
Add			<del></del>
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
	<u> </u>	
	141414	
it an amendment provides for an exclusion provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:		if other than the
date this document was signed. August 10, 2018		
Effective date if applicable:		
(4)	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of Sta	meet the applicable statutory filing requirements, ate's records.	this date will not be listed as the
Adoption of Amendment(s) (CHEC	<u>CK ONE</u> )	
■ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	areholders. The number of votes east for the amend proval.	lment(s)
	hareholders through voting groups. The following s roup entitled to vote separately on the amendment(s	
"The number of votes east for the amenda	ment(s) was/were sufficient for approval	
by		
(voting	g group)	
The amendment(s) was/were adopted by the boa action was not required.	pard of directors without shareholder action and shar	reholder
☐ The amendment(s) was/were adopted by the inc action was not required.	corporators without shareholder action and sharehol	der
August 10, 2018 Dated		
Signature Leank	Marsala	
	ent or other officer – if directors or officers have not orator – if in the hands of a receiver, trustee, or other y that fiduciary)	
Frank Marsal	la	
(Ту	yped or printed name of person signing)	
President, M	Marsala Pest Control,Inc.	
	(Title of person signing)	