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SECRETARY OF STAL

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AMERICAN LAN	DSCAPE AND LAWN CA	ARE,INC.		
	BER; P02000004239				
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.			
Please return all corre	spondence concerning this mat	iter to the following:			
	CHIP VAN NELSON				
	Name of Contact Person				
	AMERICAN LANDSCAPE AND LAWN CARE INC .				
	Firm/ Company				
	1352 PINEWOOD RD	, ,			
	Address				
	JACKSONVILLE BEACH, I				
		City/ State and Zip Code	2		
For further information	E-mail address: (to be us on concerning this matter, pleas	sed for future annual report se call:	notification)		
CHIP VAN NELSON		ut (<u>904</u>	349-6257		
Name of Contact Person		at () 349-6257 Area Code & Daytime Telephone Numbe			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	irtment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filling Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327			Building		
Tallahassee Fl 32314			Svecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

AMERICAN LANDSCAPE AND LAWN CARELING. (Name of Corporation as currently filed with the Florida Dept. of State) P02000004239

(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this articles of Incorporation:	s Florida Profit Corporation add	pts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered," "professional association," or the abbreviation	"Co" A professional corporati	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SECRETAN SECRETAN 2015 AUG
		3
D. If amending the registered agent and/or registered office add		of the
new registered agent and/or the new registered office addres	<u>ss:</u>	
Name of New Registered Agent		
(Florida s	treet address)	
New Registered Office Address:	(City)	Florida(Zip Code)
	(Cijy)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian		of the position
Signetium of North	Revistared Agent if changing	

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
L) Change	VP	BRITTANY VAN NELSON	1352 PINEWOOD RD
X Add			JACKSONVILLE BEACH, FL
Remove			32250
2) Change	T	BRUCE VAN NELSON	1352 PINEWOOD RD
X Add			JACKSONVILLE BEACH, FL
Remove			32250
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			•
Add			
Remove			

The date of each amendment(s) adoption:	, if other than th
Effective date if applicable: 8/7/15 (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated8/7/15	
Signature (By a director, president or other office) if directors or officers have not been	
(By a director, president or other offices) if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Pruce C. Van Nc/Son JR. (Typed or printed name of person signing)	
a Drasodent	

(Title of person signing)