P0200009455

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Division of Corporations NAME OF CORPORATION: Total land and Tree, Inc P02000029755 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FL 32736 City/ State and Zip Code For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$52.50 Filing Fee **□\$**43.75 Filing Fee & **□\$43.75** Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Street Address

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

Articles of Amendment to

Articles of Incorporation

of

Total land and]	iree Jac
(Name of Corporation as currently	filed with the Florida Dept. of State)
P020000	029755
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	m in
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	get address)
	-
New Registered Office Address:	, Florida (City) (Zip Code)
•	(2)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Cimina (N. D	egistered Agent if changing
Signature of New Ki	egistered 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	PT John D	loe .	
X Remove	<u>V</u> <u>Mike J</u>	ones	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Lisa Spaulding	19708 State Road 44
Add		7	EUSTIS FL
Remove			32736
2) Change	P	Chad Spaulding	19708 State Road 44 EUSTIS FL
√. Add			
Remove	· ID	rion C auldin	32736
3) Change	<u>v.P</u>	Lisa Spaulding	19708 State Rd 44 FUSTIS FL 32736
Add		•	FUSTIS, PL32136
Remove			
4) Change			
Add			1
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<u>-</u>		
Remove			

	(Be specific)

	<u></u>
	realogation or especiation of issued shares
an amendment provides for an exchange of an exchange of a second or implementing the ame	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
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The date of each amendment(s) adoption: 4-6-2017	, if other than the
late this document was signed.	
Effective date if applicable:	
(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 we locument's effective date on the Department of State's records.	vill 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 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.	
Dated 9/6/2017 Signature Line Soon laine	
(By a director, president or other officer – if directors or afficers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President (Title of person signing)	