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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Stave + S	shovel LANDSCAPE Wo	des, Inc.
DOCUMENT NUMBER: POZO00//	0521	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
MATTHEW J. I	Contact Person)	
Stowe + Shovel lan	idscape Works, In	<i>C.</i>
	Address) -lorida Te and Zip Code)	
MATTHEW J. Doyle (Name of Contact Person)	at (954) 46/	8734
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:		
□ \$35 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci	rcle

Tallahassee, FL 32301



December 13, 2006

MATTHEW J. DOYLE STONE & SHOVEL LANDSCAPE WORKS INC. 5315 NW 49TH STREET COCONUT CREEK, FL 33073

SUBJECT: STONE AND SHOVEL LANDSCAPE WORKS, INC.

Ref. Number: P02000110521

We have received your document for STONE AND SHOVEL LANDSCAPE WORKS, INC. and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The specific business purpose of the professional association must be stated in the document.

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) 245-6908.

Sylvia Gilbert Document Specialist

Letter Number: 706A00070985

Articles of Amendment to Articles of Incorporation of SECKETARY OF STATE (Name of corporation as currently filed with the Florida Dept. of State)

	(Document number of corporation (if known)
	the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> following amendment(s) to its Articles of Incorporation:
NEW COR	PORATE NAME (if changing):
	DOYLE LANDSCAPE ARCHITECTURE, P.A.
(Must contain	the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") all corporation must contain the word "chartered", "professional association," or the abbreviation "P.A."
and/or Artic	ENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) the Title(s) being amended, added or deleted: (BE SPECIFIC)
DURP	ose of Business is to provide
CANE	ose of Business is to provide scape Apertity of and assign vides.
Ser	vices.

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: DEC. 4, 2006
The date of each amendment(s) adoption: DEC. 4, 2006 Effective date if applicable: DEC 31, 2006
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signature
(By a director, president or other officer - 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)
(Typed or printed name of person signing)
President
(Title of person signing)

FILING FEE: \$35