P03000 072 451

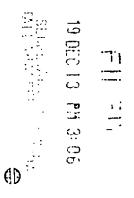
(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



500336466755

11/84/19--01629--065 **35.60



DEC 1 F MID T SCHEDEDER

COVER LETTER

.

TO: Amendment Section Division of Corporations

A property of the second

NAME OF CORPORA	TION: POSERTS	LANDSCAPIA	VG & LAWN MAINT
DOCUMENT NUMBE	R: 7030000	72451	1
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	ROBERT S	Name of Contact Person	
	!. · · · · · · · · · · · · · · · · · · ·	Name of Contact Person	n
	ROBERTS L	ANDSCAPINO	- & LAUN MAINT
		Firm/ Company	,
	1810 JW9	31 AVE UN	VIT \$2410
1	NORTH LAUR	DERDALE, P	L 33068
		City/ State and Zip Cod	e
	ZUI1 198	3 DEW 50	MTH MET notification)
	E-mail address: (to be us	sed for future annual report	notification)
For further information c	oncerning this matter, plea	se call:	
ROBERT SO	IMMA	at (954	de & Daytime Telephone Number
Name of)	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	he following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailin	g Address		Address
	Iment Section		dment Section
	on of Corporations ox 6327		on of Corporations Centre of Tallahassee
	assee, FL 32314		N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

.

	to
Articles of	Incorporation
	A.F

ROBERTS	LANGECAPINES & L	ALLY MAINTENAN	CE	
BOBERTS	(Name of Corporation as currently	filed with the Florida Dept. of State)	
PO3 6000	72451			
	(Document Number of C	Corporation (if known)		
Pursuant to the provisions of sits Articles of Incorporation:	section 607,1006, Florida Statutes, this FI	orida Profit Corporation adopts the t	following amendr	ment(s) to
A. If amending name, enter	the new name of the corporation:			
			The ne	231°
"Inc.," or Co.," or the desi-	and contain the word "corporation," "co ignation "Corp," "Inc," or "Co". A p ssociation," or the abbreviation "P.A."	mpany," or "incorporated" or the abl professional corporation name must	breviation "Corp. t contain the wo	. " rd
B. Enter new principal office (Principal office address MU	ce address, if applicable: <u>IST BE A STREET ADDRESS</u>)			-
D. If amending the register	E A POST OFFICE BOX) ed agent and/or registered office addred d/or the new registered office address:	ss in Florida, enter the name of the	19 DEC 13 PM 3: 0.6	
	(Florida stree	t address)		
New Registered Office	ve Address:(C		(Zip Code)	-
New Registered Agent's Sig I hereby accept the appointm	nature, if changing Registered Agent: ent as registered agent. I am familiar wi Signature of New Reg	th and accept the obligations of the po gistered Agent, if changing	osition.	

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 tule, 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)	<u>Title</u>	<u>Name</u>	Address MARCUS SUMMA
1) X Change	_5	MARCUS SUMMA	3814 POYLLUOT CT
Add			1241E16H NC 2760
Remove			
2) Change			19 <u>0</u> 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Add			
Remove 3.) Change			<u> </u>
Add			<u> </u>
Remove			<u>₩</u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. If amending or ad (Attach additional s	ding addi sheets, if no	tional Articles, enter change(s) here: ecessary). (Be specific)	

	=		
			_
			_
	<u>,</u>		
	_		
	<u> </u>		
		-	<u></u> JJ
		သ	
F. If an amendment provides for an 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)		3: 06	
	-4) ·		
		<u>-</u>	
		-	<u>.</u>
		•	
Page 3 of 4			
The date of each amendment(s) adoption:		, if o	ther than the
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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)				
The amendment(s) was/were adopt by the shareholders was/were suffi		. The number of votes cast for	the amendment(s)		
☐ The amendment(s) was/were appro must be separately provided for ea	ved by the shareholder ch voting group entitle	s through voting groups. The and to vote separately on the an	following statement nendment(s):		
"The number of votes cast for	the amendment(s) wa	s/were sufficient for approval			
bv	<u></u>				
-	(voting group)				
☐ The amendment(s) was/were adopt action was not required.	ed by the board of dire	ctors without shareholder action	on and shareholder		
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators	s without shareholder action a	nd shareholder		
Dated 12 (14			To.	19	
Signature	lost 9.	Sunson		030	<u> </u>
(By a dire	ctor, president or other	officer – if directors or office in the hands of a receiver, true		$\overline{\omega}$	
	I fiduciary by that fiduc		1.		
F	20 80 27	SUMMA		ယ္	
<u> </u>		nted name of person signing)		5	
	PRESIDE	WT	ID		
r'T	itle of nerson signing)				