## P03000130186

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: CRICKET'S TREE	ESERVICE, INC.	
	1BER: P03000130186		
	s of Amendment and fee are su		
Please return all corr	espondence concerning this ma	tter to the following:	
	CHRISTY R. BARCO		
		Name of Contact Perso	n
	CRICKET'S TREE SERVIC		
		Firm/ Company	
	6329 Fitz Lane		
		Address	
	Tallahassee, FL 32311		
		City/ State and Zip Cod	
	Christy @ericketstree.com		
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, pleas		510-0707
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status		Certificate of Status
Ar Di P.0	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amene Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810
1 3	nana5500, FL 52514		issoe, FL 32303

## Articles of Amendment to Articles of Incorporation of

,	10.17	W.	THE	TREE	CUDA	(21)	DATE
ι	JKJU	.KI	- 1 3	IKEE	SERV	L / F.	IINC

(Name (	of Corneration as curren	tly filed with the Florida Dept.	of State)
P03000130186			,
-	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation add	opts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		cri.
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation nat	The new or the abbreviation "Corp.," me must contain the word
B. Enter new principal office address,	if applicable:	4414 Entrepot Ct.	
Principal office address <u>MUST BE A S</u>		Tallahassee, FL 32310	202 SE
			ĈÃ <b>€ m</b>
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> )		4414 Emrepot Ct.	HASSER A
		Taliahassee, FL 32310	
			72¢
). If amending the registered agent an new registered agent and/or the new			e of the
Name of New Registered Agent	CRICKETS 850 LLC		
	3607 Mossy Creek Lane		
		treat address)	
	(Florida s	a Ca aaaa (SS)	
New Registered Office Address:	Tallahassee	aco adaress	32311 Florida

Check if applicable

■ The amendment(s) is are being filed pursuant to s. 607.0120 (11) (e). F.S.

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 little.

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 fixted 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> <u>John</u>	1 Doc	
X Remove	$\underline{V}$ Mik	e Jones	
_X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Tide</u>	Name	<u>Addres</u> s
1) Change	Presiden	CHRISTY R. BARCO	6329 Fitz Lane
Add X Remove			Fallahassee, FL 32314
2)Change	\/P	GARY M. BARCO	6329 Fitz Lanc
Add	A		Tallahassee, FL 32311
X Remove 3.4 Change	Office N	ERIN WALKER	6329 Fitz Lane
Add			Fallahassee, Ff. 32311
X Remove	į,	CRICKET'S 850 LLC	3607 Mossy Creek Lane
4) Change X Add	•	- CARCASS ON COLOR	Tallahassee, FL 32311
Remove			
57 Change			
Add			
Remove			
б) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here:  (Be specific)
·	
······································	
f an amendment provides for an each	nange, reclassification, or cancellation of issued shares.
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	
provisions for implementing the ame	
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the amei (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the amei (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

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	option: 1/2/2	.5	, if other than the
	iry 2, 2025		
Encouve date if applicable.	(na more than 9	0 days spier amendment fil	c date)
Note: If the date inserted in this bl document's effective date on the De-		rable statutory filing requi	ements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators, or b	board of directors without :	shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were sit		e number of votes cast for (	lie amendment(s)
The amendment(s) was/were app must be separately provided for			
	or the amendment(s) was/we	• • •	
by Chron K	(voung group)	,·	
	(voung group)		
January 2, 2 Dated	025		
Signature	high Ba	مده	
selected	ector, president or other offic , by an incorporator – if in the d tiduciary by that fiduciary)	e hands of a receiver, truste	
	CHRISTY R. BARCO	hug R Bo	uco
-	(Typed or printed)	name of person signing)	
	PRESIDENT		

(Title of person signing)