## P0400034173

(Requ	uestor's Name)	<u>.</u>
(Adda	ess)	
(Addı	ess)	
(City/	State/Zip/Phone #	")
PICK-UP	WAIT	MAIL
(Busi	ness Entity Name	)
(Doct	ıment Number)	<u></u>
Certified Copies	Certificates o	f Status
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08/11/04--01027--017 \*\*43.75

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Amendment AFJ 8-17-04

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF C	CORPORATION: Coastal Quality Tr	ree Service	
DOCUMEN	T NUMBER: P04000034173	<del>-</del>	
The enclosed	Articles of Amendment and fee are	submitted for filing.	
Please return	all correspondence concerning this r	natter to the following:	
	James D. Clatdon III		
	(Name of C	Contact Person)	
	Coastal Quality Tree Service		
	(Firm/	Company)	
	1998 Embassy Road		
	(A	ddress)	<del></del>
	North Port, FL 34286		
	(City/ State	/ and Zip Code)	
For further in	formation concerning this matter, ple	ease call:	
Hector Munoz		at ( 786 ) 4021825	
	(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a	check for the following amount:		
□ \$35 Filing Fee	© \$43.75 Filing Fee & Certificate of Status		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corpore 409 E. Gaines Street	ations

Tallahassee, FL 32399

SECRETARY OF STATE DIVISION OF CORPORATION

Articles of Amendment to Articles of Incorporation of

Coastal Quality Tree Service, Inc.

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P040	000034173
	(Document number of corporation (if known)
	visions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> g amendment(s) to its Articles of Incorporation:
NEW CORPORA	TE NAME (if changing):
(Must contain the word (A professional corpora	I "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") ation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
	ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) (s) being amended, added or deleted: (BE SPECIFIC)
PLEASE ADD AS D	RECTOR: Hector Munoz, 1998 Embassy Road, North Port FL, 34286
PLEASE DELETE A	S DIRECTOR: Darrell J. Walchle, 6950 Rosemont Drive, Englewood, FL 34224
PLEASE ADD OFFI	CERS: Hector Munoz, 1998 Embassy Road, North Port FL, 34286, President
	David E. Coffin, 1355 Deprie, Englewood FL, 34223, Treasurer
PLEASE DELETE O	FFICERS: Cherie L. Claydon, 1998 Embassy Road, North Port FL, 34286
	Darrell J. Walchle, 6950 Rosemont Drive, Englewood FL, 34224
	(Attach additional pages if necessary)
If an amendment pr for implementing t	rovides for exchange, reclassification, or cancellation of issued shares, provisions he amendment if not contained in the amendment itself: (if not applicable, indicate N/A
N/A	

(continued)

The date	of each amendment(s) adoption: 4 August 2004
Effective o	date if applicable: 4 August 2004
	(no more than 90 days after amendment file date)
Adoption	of Amendment(s) (CHECK ONE)
Ø	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.
Signed this	7th day of August 2004
	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)
	Hector Munoz
	(Typed or printed name of person signing)
	President
	(Title of person signing)

FILING FEE: \$35