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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: AR LONGSCAPON SOVICES, INC.
DOCUMENT NUMBER: PO400055225
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Chorles Divelo (Name of Contact Person)
Charles Diveto Jr., CPA, PA
M4Q0 NW4 Street (Address)
Partation, LL 3331M (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person)  (Name of Contact Person)  (Area Code & Daytime Telephone Number)
Enclosed is a \$35,00 check made payable to the Department of State.

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 Circle Tallahassee, FL 32301

**Articles of Amendment** to **Articles of Incorporation** (Name of corporation as currently filed with the Florida Dept. of State) (Document number of corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corpd adopts the following amendment(s) to its Articles of Incorporation: **NEW CORPORATE NAME (if changing):** (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions

(continued)

for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

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I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete perform of my division as registered agent. Or, it document is being filed merely to reflect a change in the registered office address, I hereby confirm that corporation has been notified in writing of this change.  (Signifure of Registered Agent)  (Date)  (Typed or Printed Name)	ance f this t the

6. The name and street address of the new registered agent (if changed) and /or registered office

The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) ( <u>CHECK ONE</u> )
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)
(Title of person signing)

FILING FEE: \$35