## P04 000086587

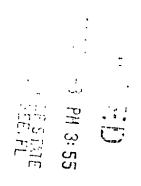
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: \_ TINDALE PEST CONTROL INC, DOCUMENT NUMBER: P04000086587 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: TONYA TINDALE Name of Contact Person TINDALE PEST CONTROL INC. Firm/ Company 13300 N.W. 21st COURT Address CITRA, FL. 32113 City/ State and Zip Code tinpestcon@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (352 ) 368-5981

Area Code & Daytime Telephone Number TONYA TINDALE Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$43.75** Filing Fee & ■\$43.75 Filing Fee & **■\$**52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

P04000086587	TINDALE PEST CO	NTROL INC.	ly filed with the Florid	da Dept. of State)		
	(352) 368- isions of section 607.1006,	ያ <b>ው</b> фф <b>@</b> nt Number o 5981	of Corporation (if know		ing ame	ndment(s)
A. If amending na	me, enter the new name of	the corporation:				
name ment ha distinc	zuishable and contain the we	and "comparation ""		ometed" on the abbumie	The	new "
"Inc.," or Co.," or	r the designation "Corp," essional association," or the	"Inc," or "Co".	A professional corpor			
B. Enter new princ	cipal office address, if app	licable:				
	dress <u>MUST BE A STREE</u>					
				<u> </u>		<u> </u>
C finter new mair	ling address, if applicable:				r-3	
	s MAY BE A POST OFFIC				;	
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				• •	<u>C</u> S	<del></del>
		,	/		<del>-0</del>	; i
D. If amending the	registered agent and/or r	egistered office add	ress in Florida, enter	the name of the $t^{-1}(x)$	C.3	
	agent and/or the new regis			بر الابت	<b>က</b> က်	
Name of Ne	ew Registered Agent			[TT]	ΰi	
Mame of The	w negatered Agent					
	<del></del>	(Elorida et	reet address)			
	/	/ 10/142 31.	reer address;			
New Registe	ered Office Address:		(Citv)	, Florida	p Code)	
			(City)	(24)	p Cixie)	
	ent's Signature, if changing					
hereby accept the a	appointment as registered a	gent. I am familiar	with and accept the ob	ligations of the position	1.	
	•					
		G	Registered Agent, if cha	<del>.</del>		

Check if applicable

<sup>☐</sup> 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)

Example:

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 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 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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V	DENNIS K. TINDALE JR.	6029 N.E. 26th AVE.
X Add			OCALA,FL.34479
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
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Remove			
6) Change			
Add	<del></del>		
Remove			

	dditional sheets, if necessary)	ticles, enter change(s . (Be specific)			
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lf an am	endment provides for an ex	change, reclassification	on, or cancellation o	of issued shares,	
provisio	ons for implementing the an	change, reclassificati nendment if not conta	on, or cancellation or ained in the amends	of issued shares, nent itself:	
provisio (if r	nendment provides for an expons for implementing the an interest to applicable, indicate N/A)	change, reclassificati nendment if not conti	on, or cancellation of ained in the amends	of issued shares, nent itself:	
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The date of each amendment(s)	idoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date partment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	lopted by the incorporators, or board of directors without shareholder acti	on and shareholder
The amendment(s) was/were as by the shareholders was/were	lopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	s)
	proved by the shareholders through voting groups. The following statem reach voting group entitled to vote separately on the amendment(s):	ent
"The number of votes car	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
1-27-21 Dated		
Signature	De X Dille An	.·
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	rt
	DENNIS K. TINDALE SR.	
	(Typed or printed name of person signing)	
	PRESIDENT OF TINDALE PEST CONTROL INC.	
	(Title of person signing)	