PO4 (0000 \$7009

(Requestor's Name)		
(Address)		
(Address)		
,		
(City/State/Zip/Phone #)		
(City/State/Zip/Prione #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		

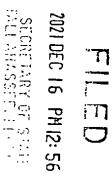
Special Instructions to Filing Officer:		
J. HORNE JAN - 5 2022		
J. HOLL		
1AN - 3 2022		





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AJ LAWN SERVI	CE OF ORLANDO INC			
	BER:				
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	ALLEN OSBOURNEJOHN	ISON			
		Name of Contact Person	<u> </u>		
	AJ LAWN SERVICE OF ORLANDO INC				
	Firm/ Company				
	1312 N PINE HILLS RD				
		Address			
	ORLANDO, FL 32808				
		City/ State and Zip Code	2		
	ajlawncompanylle@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
JAMES CHARLES		at (, 952-7977		
Name of Contact Person		at (Area Coo)de & Daytime Telephone Number		
Enclosed is a check f	for the following amount made	payable to the Florida Depa	irtment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

Articles of Amendment to Articles of Incorporation

FILED

AJ LAWN SERVICE OF ORLANDO 1802 | DEC 16 PM 12: 57

(<u>Name</u>	of Corporation as curren	itly filed with t	he Florida Dent. of Sv	ater State
	P0400	0087009	TALLAHASSE	E. Fire
	(Document Number	of Corporation	(if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profi	t Corporation adopts th	ne following amendment(s)
A. If amending name, enter the new n	ame of the corporation:			
			<u></u>	Thenew
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp, " "Inc," or "Co".	A professiona		
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		624 WES	TYN BAY BLVD	
		OCOEE F	OCOEE FL 34761	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1312 N PI	NE HILLS RD	
		ORLANDO, FL 32808		
D. If amending the registered agent ar	ud/or registered office ad	dress in Florid	a enter the name of the	he .
new registered agent and/or the ne			a. e.tter the hame of the	
Name of New Registered Agent	JAMES CHARLES			
	624 WESTYN BAY BLY	VD		
	Ælorida s	street address)	1	
New Registered Office Address:	OCOEE		, Floric	34761 la
		(Ciţy)		(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ages	1¢·		
hereby accept the appointment as regist	ered agent. I am familiai	with and accep	ot the obligations of the	position.
	Signature of New	Ranietannal Amo	nt it changing	 _

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 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.

Example: XChange	<u>PT</u>	<u>John Doe</u>		
X Remove	<u>V</u>	Mike Jones		
_X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1) Change	VP	JAMES CHARLES	624 WESTYN BAY BLVD	
X Add		_	OCOEE, FL 34761	
Remove				
2) Change		-		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Ar Attach additional sheets, if necessary).	(Be specific)	_		
	<u>-</u> .			
				
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<u>If an amendment provides for an exc</u>	hange, reclassification, or	r cancellation of issue	ed shares	
provisions for implementing the am	endment if not contained	in the amendment it	self:	
(if not applicable, indicate N/A)				
				
		· · · · · ·		
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The date of each amendment(s) adop	otion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	Imm P. desta Cy (no more than 90 days after amendment fi	le dater
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirement of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was were adopte action was not required.	ed by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes east for cient for approval.	the amendment(s)
	ved by the shareholders through voting groups. The jeth voting group entitled to vote separately on the am	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
bv		
	(voting group)	
selected, f appointed	etor, president or other officer – if directors or officer by an incorporator – if in the hands of a receiver, trust fiduciary by that fiduciary) (Typed or printed name of person signing) RESIDENT	
_	(Title of person signing)	