## P0400009aa08

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(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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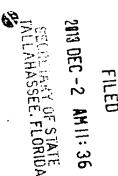
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## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

December 9, 2013

ADELA SANTOS A PERFECT CUT TREE SERVICES, INC. 261 19TH ST. SW NAPLES, FL 34117

SUBJECT: A PERFECT CUT TREE SERVICES INC

Ref. Number: P04000092208

We have received your document for A PERFECT CUT TREE SERVICES INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 513A00027963

## Articles of Amendment to Articles of Incorporation

## A PERFECT CUT TREE SERVICES, INC.

FILED

(Mailing address MAY BE A POST OFFICE BOX)	TATE DRIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation:  A. If amending name, enter the new name of the corporation:  A. PERFECT CUT TREE SERVICE, INC  name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the a "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  (Florida street address)	TORIDA
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Name of New Registered Agent  (Florida street address)	_
Name of New Registered Agent  (Florida street address)	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	_
(Ety) (Esp Code)	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	

Signature of New Registered Agent, if changing

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 <math>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: X Change	PT	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add Remove				
2) Change		<del></del>		
Remove 3) Change				
Add		<del>-</del>		
Remove 4) Change		<u> </u>		
Add Remove				
5) Change		<del></del>		
Remove				
6) Change	<u></u>	_		
Remove				

· · · · · · · · · · · · · · · · · · ·	icles, enter change(s) here: (Be specific)
	, , , , , , , , , , , , , , , , , , ,
n amendment provides for an exch ovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
n amendment provides for an exchovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and if not contained in the amendment itself:
ovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and and itself:
ovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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ovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an itself:
ovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and if not contained in the amendment itself:
ovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an indicate in the amendment itself:

The date of each amendment(s) add date this document was signed.	option:	_, if other than the
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 adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated 11/26/20	13	
Signature ADEL	A SANTOS Adela Santas	
(By a dir	ector, president or other officer – if directors or officers have not been	
· •	, by an incorporator – if in the hands of a receiver, trustee, or other court	
	d fiduciary by that fiduciary)	
арропис	a fiducially by that fiducially)	
,	ADELA SANTOS	_
_	(Typed or printed name of person signing)	
ı	PRESIDENT	
-	(Title of person signing)	