P04000132308

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PICK-UP	WAIT	MAIL
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(Bt	isiness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		

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Amend

09 JUL 21 AH 11:44 SECRETARY OF STATE ALL AHASSEF, FLORIDA

P Roceits 7017 2:1120091

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION:	Tarzan Tree Service of the Florida K	eys Inc
DOCUMENT NU	J MBER:	P04000132308	
The enclosed Artic	cles of Amendment a	nd fee are submitted for filing.	
Please return all co	orrespondence concer	ming this matter to the following:	
		Steven Pribramsky	
		Name of Contact Person	
		Pribramsky & Zuelch	
		Firm/ Company	
937 Fleming Street		937 Fleming Street	
		Address	
		Key West, FL 33040	
		City/ State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further information	ation concerning this	matter, please call:	
	even Pribramsky	at (<u>305</u>) 294-81	
Name	e of Contact Person	Area Code & Daytime Telephone	Number
Enclosed is a check	k for the following ar	mount made payable to the Florida Department	of State:
\$35 Filing Fee	\$43.75 Filing Fee Certificate of Star	tus Certified Copy C (Additional copy is enclosed) C	2.50 Filing Fee ertificate of Status ertified Copy Additional Copy is enclosed)
Mailing An Amendmer Division of P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 13, 2009

STEVEN PRIBRAMSKY PRIBRAMSKY & ZUELCH 937 FLEMING STREET KEY WEST, FL 33040

SUBJECT: TARZAN TREE SERVICE OF THE KEYS, INC.

Ref. Number: P04000132308

We have received your document for TARZAN TREE SERVICE OF THE KEYS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 009A00023921



Please see attached corrected copy.

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

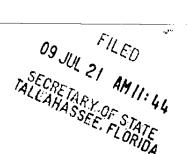
NAME OF CORI	PORATION;	Tarzan Tree Service of the k	Keys, Inc
DOCUMENT NU	JMBER:	P04000132308	
The enclosed Artic	cles of Amendment and	fee are submitted for filing.	
Please return all co	orrespondence concernin	g this matter to the following:	
		Steven Pribramsky	· · · · · · · · · · · · · · · · · · ·
		Name of Contact Person	
		Pribramsky & Zuelch	
Firm/ Company 937 Fleming Street		Firm/ Company	
		Address	4
		Key West, FL 33040	
		City/ State and Zip Code	
	E-mail address: (to b	e used for future annual report notification)	
For further informa	ation concerning this ma	tter, please call:	
		at (305)2	
Name	of Contact Person	Area Code & Daytime Tel	lephone Number
Enclosed is a check	k for the following amou	int made payable to the Florida Depar	tment 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 Ac		Street Address Amendment Section	
Amendment Section Division of Corporations		Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of



	Service of the		LORIDA
(Name of Corporation as c	urrently filed with	the Florida Dept. of State)	
P	04000132308		
(Document)	Number of Corporat	on (if known)	
ursuant to the provisions of section 607. mendment(s) to its Articles of Incorporation		es, this <i>Florida Profit Corporatio</i>	on adopts the follow
. If amending name, enter the new nam	<u>ie of the corporatio</u>	<u>n:</u>	
			The new
ame must be distinguishable and conta bbreviation "Corp.," "Inc.," or Co.," or ame must contain the word "chartered,"	the designation "C	orp," "Inc," or "Co". A profess	ional corporation
. Enter new principal office address, if		22976 Bluegill Lan Cudjac Key, FL	e
Principal office address <u>MUST BE A STE</u>	REET ADDRESS)	0	
		- Cudge Key, FL	
		Cudjac Key, FL 3301	
Enter new mailing address, if applica (Mailing address MAY BE A POST OF		3304	12
		· -	12
(Mailing address <u>MAY BE A POST OF</u>	<u>FFICE BOX</u>) or registered office	3301 22976 Bluegill Lar Cudjoe Key Fi 330 address in Florida, enter the nar	+2
(Mailing address MAY BE A POST OF	<u>FFICE BOX</u>) or registered office	3301 229716 Bluegill Lar Cudjoe Key Fr 330 address in Florida, enter the nar lress:	+2
(Mailing address MAY BE A POST OF	or registered office registered office add	3304 22976 Bluegill Lar Cudjoe Key Fr. 330 address in Florida, enter the nar lress:	+2
(Mailing address MAY BE A POST OF	or registered office registered office add Sandra Down 22976 Bluegi	3304 22976 Bluegill Lar Cudjoe Key Fr. 330 address in Florida, enter the nar lress:	+2
. If amending the registered agent and/new registered agent and/or the new registered agent and/or the new registered Agent:	or registered office registered office add Sandra Down 22976 Bluegi	3304 22976 Bluegill Lar Cudjoe Key Fi- 330 address in Florida, enter the nar lress:	H2ne of the

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
P	Nicholas Downs	22976 Bluegill Lane Cudjoe Key, FL 33042	☐ Add ☐ Remove
<u>P</u>	Sandra Downs	22976 Bluegill Lane Cudioe Key, FL 33042	☑ Add □ Remove
			Add Remove
E. II amen (attach a	ding or adding additional Articles, end dditional sheets, if necessary). (Be spo	ter change(s) here:	
E. If on or			f
<u>provisi</u>	nendment provides for an exchange, rons for implementing the amendment ot applicable, indicate N/A)	if not contained in the amendme	nt itself:

The date of each amendment	t(s) adoption: April 1, 2009
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	re adopted by the shareholders. The number of votes cast for the amendment(s)
	re approved by the shareholders through voting groups. The following statement of 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)
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated July	1, 2009
Signature (By	a director, president or other officer – if directors or officers have not been
sele	cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
	Sandra Downs
	(Typed or printed name of person signing)
	Secretary
	(Title of person signing)