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(Re	equestor's Name)	
(Ac	ddress)	<u></u>
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(Ci	ty/State/Zip/Phone #	‡)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	<u>.</u>
(De	ocument Number)	
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COVER LETTER

AMERI - PRIDE TREE SERVICES, INC.

TO: Amendment Section Division of Corporations

NAME OF CORPOR	KATION.		
DOCUMENT NUM	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	NATALIE M. BURNS		
		Name of Contact Person	n
	NATALIE M. BURNS, P.L.		
		Firm/ Company	
	800 VILLAGE SQUARE CI	ROSSING STE 337	
		Address	
	PALM BEACH GARDENS	, FL 33410	
		City/ State and Zip Cod	e
	E-mail address: (to be u-	sed for future annual report	notification)
	3 11m1 43510001 (10 00 41	ou for tarate aimaar roport	nothiounon,
For further informatio	n concerning this matter, pleas	se call:	
	φ , γ		
NATALIE BURNS		at (733-8223
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)
Amo Div P.O	cling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

to MASS WILLS

Articles of Amendment to Articles of Incorporation of

AMERI - PRIDE TREE SERVICES, INC.

"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendits Articles of Incorporation: A. If amending name, enter the new name of the corporation: The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviating "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:	
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	ion
(Principal office address MUST BE A STREET ADDRESS)	
(trincipus office address most big 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 GULFCOAST TRANSFER SERVICES INC	
2753 POST ROCK DRIVE	
(Florida street address)	
New Registered Office Address: TARPON SPRINGS Florida 34688	
New Registered Office Address:, Florida	_
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.	
7 4 0 2-11 t	
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 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
I) Change	P	SOKOL SHEHU	16485 U.S. HWY 19 N
Add			CLEARWATER, FL 33764
X Remove			
2) Change	CEO, I	TIMOTHY D. LOCKHART	2753 POST ROCK DRIVE
X Add			TARPON SPRINGS, FL 34688
Remove			<u></u>
3) X Change	P	FATBARDH SHEHU	16485 US HWY 19 N
Add			CLEARWATER, FL 33764
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			* * * * * * * * * * * * * * * * * * * *
Demove			

	ticles, enter change(s) here: (Be specific)
If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adopt date this document was signed.	tion:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depar	ck does not meet the applicable statutory filing requirements, thirtment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendmentent for approval.	ent(s)
☐ The amendment(s) was/were approving must be separately provided for each	ved by the shareholders through voting groups. The following sta ch voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareh	older
☐ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholde	r
Dated 3	one 16, 2016	
Signature	lef Cho	
selected, b	ctor, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
SC	DKOL SHEHU	
	(Typed or printed name of person signing)	
P	RESIDENT	
	(Title of person signing)	