# P04000150923

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06/15/09--01026--003 \*\*43.75

SECRETARY OF STATE FALLAHASSEE, FLORIDA 2009 JUN 15 AM 11: 16

Amend

10/17/09

#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

	Po 4 000150923
DOCUMENT NUMBER:	10 ( 000100020
The enclosed Articles of Amendm	nt and fee are submitted for filing.
Please return all correspondence c	ncerning this matter to the following:
	JILL A BRONKO
	Name of Contact Person
	DESIGNSCAPES
	Firm/ Company
	466 E MIRACLE STRIP PARKWAY
	Address
	MARY ESTHER, FL 32566
	City/ State and Zip Code
ADMINI:	TRATOR@DESIGNSCAPESFWB.COM ess: (to be used for future annual report notification)
•	
For further information concerning	
JILL A BRONK	ut\
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the follow	g amount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Fili Certificate	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

### **Articles of Amendment** Articles of Incorporation

ASECRETARY OF STATE

#### DESIGNSCAPES CONSTRUCTION SERVICES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

#### P04000150923

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

		The ne
me must be distinguishable and contain breviation "Corp.," "Inc.," or Co.," or th me must contain the word "chartered," "pro	e designation "Corp," "Inc,	" or "Co". A professional corporati
Enter new principal office address, if apprincipal office address MUST BE A STREE		
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
If amending the registered agent and/or new registered agent and/or the new reg		Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street a	ddress)
		, Florida
	(City)	(Zip Code)

## 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>	Name	Address	Type of Action
		,	Add Remove
			Add Remove
			Add Remove
(attach addi	tional sheets, if necessary). (Be specific		
provisions	ndment provides for an exchange, reclar for implementing the amendment if no applicable, indicate N/A)		
510 ISSUED	SHARES (51%) OF TOTAL COM	MON STOCK TO TODD LA	AWSON;
490 ISSUED	SHARES (49%) OF TOTAL COM	MON STOCK TO CURTIS	HOLDER.

The date of each amendmen	t(s) adoption: JANUARY 30, 2009
Éffective date if applicable:	JANUARY 30, 2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_JUN	IE 10, 2009
Signature	Tallellery-
(B)	a director, president or other officer – if directors or officers have not been
sel app	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	TODD E. LAWSON
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)