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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	McGuire's Beautiful Outdoors, Inc.
DOCUMENT NUMBER: P040	00156960
	nent and fee are submitted for filing.
_	
Please return all correspondence	concerning this matter to the following:
Kathryn K	оррі
	Name of Contact Person
McGuire's	Beautiful Outdoors, Inc.
-	Firm/ Company
PO Box 9	19
	Address
Land O La	kes. FL 34639
	City/ State and Zip Code
kathryn konni@	ncguirescorp.com
	ll address: (to be used for future annual report notification)
For further information concerning	g this matter, please call:
Joel McGuire	at (813) 323-5221 Person Area Code & Daytime Telephone Number
Name of Contact	Person Area Code & Daytime Telephone Number
Enclosed is a check for the follow	ring amount made payable to the Florida Department of State:
	.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee tificate of Status (Additional copy is enclosed) S52.50 Filing Fee Certificate of States (Certified Copy (Additional Copy is enclosed)
Mailing Addr	
Amendment Se	
Division of Co P.O. Box 6327	porations Division of Corporations Clifton Building
Tallahassee, FI	
i ananassee, i i	Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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ÎB	MAY	14	AH 10:	51

MCGUIRE'S BEAUTIFUL OU	TDOORS, INC.	SECATIAM TALLAHASO	COPSIATE
-	(Name of Corporation as currently t		
P04000156960			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of secits Articles of Incorporation:	tion 607.1006, Florida Statutes, this Fl	orida Profit Corporation adopts the	ne following amendment(s) to
A. If amending name, enter th	e new name of the corporation:		
			The new
"Corp.," "Inc.," or Co.," or t	and contain the word "corporation, he designation "Corp," "Inc," or "Corp," all association," or the abbreviation "P.	". A professional corporation n	or the abbreviation
B. Enter new principal office	address, if applicable:		
(Principal office address MUS)	<u> TBE A STREET ADDRESS</u>)		
			
C. Enter new mailing address (Mailing address MAY BE)			
	agent and/or registered office addressor the new registered office address:	s in Florida, enter the name of t	<u>he</u>
Name of New Registere	ed Agent		
			
	(Florida street	(address)	
	·		
New Registered Office		Flori	da (Zip Code)
	(C	n,v	(Zip Code)
New Registered Agent's Signa	ture, if changing Registered Agent:		
	t as registered agent. I am familiar wit	h and accept the obligations of the	e position.
+	C1 . C11 . D		
	Signature of New Reg	ristered 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	PT	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
1) Change	VP	Jeremy Williams	13466 Neville Dr
x Add			Spring Hill, FL 34609
Remove			
2) Change		_	
Add			
Remove			
3) Change		_	
Add			·
Remove			
4) Change		<u> </u>	·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets if	ditional Articles, enter change(s) here: necessary). (Be specific)
and invitation to the idea, y	The appearing
	
	
	
 	
nrovisions for implement	for an exchange, reclassification, or cancellation of issued shares, ting the amendment if not contained in the amendment itself:
(if not applicable, ind	
]
	<u> </u>
i	

The date of each amendment(s)	adoption:, if other than the
date this document was signed.	
	/3/2018
Effective date if applicable:	(no more than 90 days after amendment file date)
	(10 / 11.10 ·
	s block does not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the	Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	, v
-, <u></u>	(voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
5/3/2018 Dated	3
Dated	
Signature	Ei RL
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Eric Robinson
	(Typed or printed name of person signing)
	President
	(Title of person signing)