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COVER LETTER

TO: Amendment Section Division of Corporations

Anthony Perki	ns Stucco & Stone I	nc
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
Anthony C. Perkins		
Anthony Perkins Lawr	Name of Contact Person Care Inc	n
1749 W Kingsfield Rd	Firm/ Company	
Cantonment, FL 3253	Address 33	
	City/ State and Zip Cod	e
aperkinslawncare@beilsou	uth.net	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
Anthony C. Perkins	850	418-2221
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Dep	artment of State:
\$35 Filing Fee \$\times \text{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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

MLED

Anthony Perkins Stucco & Stone, Inc.

15 MAR 20 PH 12: 00

(Name of Corporation as currently filed with the Flo	rida Dept. of State)
(Document Number of Corporation (if)	choral.
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fa</i> its Articles of Incorporation:	·
A. If amending name, enter the new name of the corporation: Anthony Perkins Lawn Care Inc	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NIA
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NIA
D. If amending the registered agent and/or registered office addressed new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent NIA	
(Florida stree	et address)
New Registered Office Address: NA (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wing signature of New Registered Agent.	

II amending the Uniters	s and/or :	Directors	enter the title and name of each officer/o	nrector being removed and title, name, and
address of each Officer				in term being removed and true, name, and
(Attach additional sheets,			NIC	
			rst letter of the office title:	
				ustee; C = Chairman or Clerk; CEO = Chief nan one title, list the first letter of each office
held. President, Treasure				an one me, us me just tener by each office
				PST and Mike Jones is listed as the V. There is
				hould be noted as John Doe, PT as a Change,
Mike Jones, V as Remove	, and Sall	ly Smith, S	SV as an Add.	
Example: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Joi	<u>1es</u>	
X Add	<u>sv</u>	Sally Sm	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
		_		
L Add				
Remove				
2) Change				
Add		_		
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Remove				
3) Change				
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Remove

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If an amendment provides for an exch 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:
(if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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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:

The date of each amendment		, if other than the
date this document was signed Effective date if applicable:	January 1, 2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/weby the shareholders was/weby	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re 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	s cast for the amendment(s) was/were sufficient for approval	
by	(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	
Mar Dated	rch 18, 2015	
Signature _	Anthony C. Pekins	
Se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Anthony C. Perkins	
	(Typed or printed name of person signing)	_
	President	_
	(Title of person signing)	