P05000102500

| (Requestor's Name) |
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| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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COVER LETTER

| TO: Amendment Section Division of Corporations | To be a set that submit committee or party that it arrows |
|--|---|
| NAME OF CORPORATION: LAWN | CARE PRO-CUT INC. |
| DOCUMENT NUMBER: P0500010 | 02500 |
| The enclosed Articles of Amendment and fe | e are submitted for filing. |
| Please return all correspondence concerning | this matter to the following: |
| | CESAR MANDUJANO ZUÑIGA |
| • | Name of Contact Person |
| | LAWN CARE PRO-CUT |
| | Firm/ Company |
| | P.O. BOX 99. |
| , | Address |
| | DAVENPORT, FL. 33837 |
| | City/ State and Zip Code |
| | |
| Party (1990) (1990) Peterson E-mail address: (| to be used for future annual report notification) |
| For further information concerning this matter | er, please call: |
| CESAR MANDUJANO ZU | at () |
| Name of Contact Person | Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amoun | t made payable to the Florida Department of State: |
| \$35 Filing Fee \$43.75 Filing For Certificate of S | |
| 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 to Articles of Incorporation FILED AMII: 02

LAWN CARE PRO-CUT, INC.

(Name of Corporation as currently filed with the Florida Dept. of State CRETARY OF SHAPE AHASSEE. FLORIDE

P05000102500

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

| name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevio | " or "Co". A professional corporation name must |
|--|---|
| 3. Enter new principal office address, if applicable: | 1422 JOHN HORNE LN. |
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | DAVENPORT, FL. |
| | 33837 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | P.O. BOX 99 |
| , | DEVENPORT, FL. |
| | 33837 |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office act Name of New Registered Agent CESAR MAI | |
| 1422 JOHN | HORNE LN. |
| · , | rida street address) |
| New Registered Office Address: DAVENPOR | RT , Florida 33837. |
| | (City) (Zip Code) |

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 | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add Remove | P | CAYETANO MANDUJANO | P.O. BOX 1470 DAVENPORT, FL. 33836 |
| 2) Change Add Remove | Р | CESAR MANDUJANO ZUÑIGA | P.O. BOX 99 DAVENPORT, FL. 33837 |
| Change Add Remove | | _ | |
| 4) Change Add Remove | | · | · |
| 5) Change Add Remove | | · · · · · · · · · · · · · · · · · · · | |
| Change Add Remove | | ~ | |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) |
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| N/A |
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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) |
| N/A |
| |
| |
| |
| |
| |
| |

| The date of each amendment(s) a | APRIL 10, 2012 |
|--|--|
| Effective date if applicable: | PRIL 10, 2012 |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval. |
| ☐ The amendment(s) was/were ap must be separately provided for | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): |
| "The number of votes cast | t for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| action was not required. The amendment(s) was/were ad- | opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder |
| Signature (By a d | L 10, 2012 War Manufana Zutiga lirector, president or other officer— if directors of officers have not been |
| | d, by an incorporator – if in the Hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) |
| | CESAR MANDUJANO-ZUÑIGA |
| | (Typed or printed name of person signing) |
| • | PRESIDENT |
| | (Title of person signing) |