P0500011137

(Req	uestor's Name)
(Add	ress)	
(Add	ress)	
(City)	State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL.
(Busi	ness Entity Na	me)
(Document Number)		
Certified Copies	Certificate	es of Status
Special Instructions to Fi	ling Officer:	<u> </u>
:		

Office Use Only



900181029069

05/19/10--01013--011 **35.00

Amens

TO MAY 19 PM 12: 37

* Roberts MAY 2 0,2010

Leininger Law Firm, P.A. 114 Palmetto Street, Suite 8 Destin, Florida 32541 leiningerlawfirmpa.com

Michael R. Leininger Attorney and Counselor at Law Telephone: (850) 650-9916 Facsimile: (850) 650-9963

May 17, 2010

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Amendment to Articles of Organization for BACKRIDGE TREE SERVICE, INC.

Dear Sir or Madam:

Please find the enclosed Articles of Amendment to Articles of Incorporation for BACKRIDGE TREE SERVICE, INC., a Florida corporation. I respectfully request that you forward these documents to the appropriate department for timely filing and processing.

I have also enclosed funds in the amount of Thirty Five and 00/100 Dollars (\$35.00) to cover the cost of the filing.

If there are any issues, questions or concerns relating to this request or any deficiencies contained herein, please feel free to contact me via the office information listed above in order to discuss the same.

Thank you in advance for your professional courtesy and immediate assistance in this regard.

Sincerely,

Linda S. Townsend

Secretary to Michael R. Leininger

Enclosures

cc: Backridge Tree Service, Inc.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: BA	CKRIDGE TREE SERVICE, INC.	
DOCUMENT NUMB	OCUMENT NUMBER: P05000111137		
The enclosed Articles of	of Amendment and fee ar	e submitted for filing.	
Please return all corres	pondence concerning this	matter to the following:	
		chael R. Leininger	
	Na	me of Contact Person	
	Leinir	nger Law Firm, P.A.	
		Firm/ Company	
	114 Pa	Imetto Street, Suite 8	
		Address	_
	Dos	Alm Florido 00544	
		stin, Florida 32541 y/ State and Zip Code	····
	michael@le E-mail address: (to be used	iningerlawfirm.com for future annual report notification)	
For further information	concerning this matter, p	lease call:	
Michael	R. Leininger	at (850)650-9916	
Name of Co	entact Person	Area Code & Daytime Telephone Num	ber
Enclosed is a check for	the following amount ma	de payable to the Florida Department of St	ate:
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	Certified Copy Certification (Additional copy is enclosed) Certified	ate of Status
Mailing Address		Street Address	
Amendment Section Division of Corporations		Amendment Section	
P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	
		Tallahassee, FL 32301	

Articles of Amendment Articles of Incorporation of

	Articles of Incorporation of	10 MAY 19 PM 12: 37
	VI	10 MAY 19 PM 12: 37 ot. of State) ALANASSEE. FLORIDA
BACKRIDGE	TREE SERVICE INC.	TAY 19 PM 19
(Name of Corporation as curi	rently filed with the Florida Del	ot State)
P05	5000111137	- STATE
(Document Nu	mber of Corporation (if known)	LORIDA
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of	of the corporation:	
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc," or	"Co". A professional corporation
B. <u>Enter new principal office address, if ap</u> (Principal office address <u>MUST BE A STREI</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
D. If amending the registered agent and/or new registered agent and/or the new regi		rida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street addres	<u>s)</u>
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changi hereby accept the appointment as registered a	agent. I am familiar with and ac	
<u> </u>	Signature of New Registered Ages	nt. it changing

	nd title, name, and address of each Off		
	litional sheets, if necessary)		-
Title .	<u>Name</u>	Address	Type of Action
<u>D</u>	Jason Michael Homan	414 Wildwood Street	🛮 Add
		Mary Esther, Florida 32569	D Remove
D	D Steven James Van Minsel	414 Wildwood Street	☑ Add
		Mary Esther, Florida 32569	☐ Remove
			— □ Add
	· · · · · · · · · · · · · · · · · · ·		_
			
	ding or adding additional Articles, ent		
(attach a	dditional sheets, if necessary). (Be spe	ecific)	
			
	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·		
			
F Ifan on	nendment provides for an exchange, r	cologgification, or concollation of i	sound shapes
provisie	ons for implementing the amendment	if not contained in the amendmen	t itself:
	ot applicable, indicate N/A)		
	•		
			

The date of each amendment	5 - 1 - 10
•	(date of adoption is required)
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/we by the shareholders was/we	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 statemen d 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)
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/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	17 May 10
sele	a director, president or other officer - if directors of officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court of interior
	Rob Calley
	(Typed or printed name of person signing)
	President
	(Title of person signing)