P05000167525

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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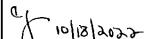




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CASTILLO TREE	AND LAWN SERVICE I	NC
DOCUMENT NUMB			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	GHEOVANNI CASTILLO		
		Name of Contact Person	1
		Firm/ Company	
	40150 CLAY GULLY RD		
	MYAKKA CITY, FL 34251	Address	
		City/ State and Zip Cod	р
For further information	E-mail address: (to be use a concerning this matter, please		
GHEOVANNI CASTILLO		at (de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, F1, 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CASTILLO TREE AND LAWN SERVICE INC

2022	·	"	18	P!	12:	Ĺ	7
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(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P05000167525	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new pration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	·
(Flor	ida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered 1. I hereby accept the appointment as registered agent. I am fam	Agent:
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	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	D	ERIKA CAR	RDONA CAMPOS	14935 ALBITRON RD
XX Add				MYAKKA CITY, FL 34251
Remove				
2) Change				
Add				
Remove				**********
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				
KCHOVC				

	Articles, enter chang ury). (Be specific)	Total mere.		
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		7, 7		
			4 - 4	
<u> </u>				
	,		=	
f an amendment provides for an provisions for implementing the	<u>exchange, reclassific</u> amendment if not co	<u>cation, or cancellation</u> ontained in the amer	on of issued shares, adment itself:	
	/A)			
(if not applicable, indicate N				
(if not applicable, indicate N				
(if not applicable, indicate N		-		
(if not applicable, indicate N				
(if not applicable, indicate N				
(if not applicable, indicate N				
(if not applicable, indicate N				
(if not applicable, indicate N				
(if not applicable, indicate N				
(if not applicable, indicate N				

The date of each amendmen date this document was signed		, if other than the
edie uns document was signed • • • • • • • • • • • • • • • • • • •	06/01/2022	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	vill not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/we must be separately provide	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 vote:	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	
•	/2022	
Signature _		
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 popointed fiduciary by that fiduciary)	
	GHEOVANNI CASTILLO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	