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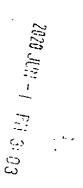
(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Name	e)
(Doc	cument Number)	
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		of Status

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COVER LETTER

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TO: Amendment in Division of C			
NAME OF COR	PORATION: Ken's Trim Service	s, Inc.	
DOCUMENT NU	D04000003497	. <u> </u>	
The enclosed Artic	cles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	Lucinda Ammerman		×
		Name of Contact Person	<u> </u>
	Ken's Trim Service, Inc.		
		Firm/ Company	
•	143 S,W, Fordham Glen		
	-	Address	
	Ft. White, FL 32038		
		City/ State and Zip Code	B
	cindyammerman@gmail.com	ı	
	E-mail address: (to be us	sed for future annual report	notification)
For further inform	ation concerning this matter, pleas	se call:	
Lucinda Ammerm	an	at (³⁸⁶	984-0967
Na	me of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	E □\$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation

of

2020 JUN - 1 PH 3: no

	3: 03
(Name of Corpo	ration as currently filed with the Florida Dept. of State)
(Do	ocument Number of Corporation (if known)
rursuant to the provisions of section 607.1006, Flo s Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name of the	he corporation:
	The new
ame must be distinguishable and contain the word Inc.," or Co.," or the designation "Corp," ", chartered," "professional association," or the a	d "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc," or "Co". A professional corporation name must contain the word
Enter new principal office address, if applic Principal office address MUST BE A STREET	
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE	<u> </u>
If amending the registered egent and/or reg	ristered office address in Florida, enter the name of the
. If amending the registered agent and/or reg new registered agent and/or the new registe	ristered office address in Florida, enter the name of the ered office address:
new registered agent and/or the new registe	ered office address:
new registered agent and/or the new registe	
new registered agent and/or the new registe	ered office address:
new registered agent and/or the new registe	ered office address:

Check if applicable

.

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 tille, 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	Matthew F. Morgan	5521 S.E. 30th.Avenue
XAdd			Ocala. FL 34480
Remove			
2) Change	D	Tracy Hobby	6770 N.W. 10th Avenue
X Add			Bell. FL 32619
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	cles, enter change(s) here: (Be specific)
	202n iii (- 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
	2020 July - 1 Fit 3: 03
If an amendment provides for an exchange	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N A)	nument is not contained in the amendment isen.

. .

•	5/26/2020	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	26/2020	
Effective date if applicable:	(no more than 90 days after amendm	Claritation (Claritation)
	(no more than 90 days after amenam	ent file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing Department of State's records.	requirements, this date will not be listed as the $PH(3:03)$
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors with	thout shareholder action and shareholder
■ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cas sufficient for approval.	st for the amendment(s)
	approved by the shareholders through voting groups. For each voting group entitled to vote separately on the	
"The number of votes ca	ist for the amendment(s) was/were sufficient for appr	oval
by		**
	(voting group)	
5/26/202	0	
Dated	J2 . 1 / V	
Signature	Friends / Sce	
	director, president or other officer - if directors or o	fficers have not been
	ted, by an incorporator - if in the hands of a receiver	, trustee, or other court
арро	inted fiduciary by that fiduciary)	
	Lucinda Ammerman	
	(Typed or printed name of person signi	ng)
	VP/Secretary	
	(Title of person signing)	