

P06000038812

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(City/State/Zip/Phone #)

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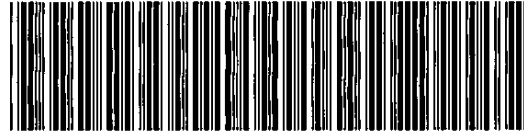
(Business Entity Name)

(Document Number)

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01/10/08--01005--001 **43.75

RECEIVED
08 JAN 10 AM 8:21
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 JAN 10 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

0. Conflicts JAN 10 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HUBCAP LAWN SERVICE INC

DOCUMENT NUMBER: P06000038812

The enclosed **Articles of Amendment** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NICOLE MCMILLAN

(Name of Contact Person)

HUBCAP LAWN SERVICE INC

(Firm/ Company)

2313 W CHURCH STREET

(Address)

ORLANDO, FL 32808

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

NICOLE MCMILLAN

(Name of Contact Person)

at (407) 822-7640

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

HUBCAP LAWN SERVICE INC

(Name of corporation as currently filed with the Florida Dept. of State)

P06000038812

(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:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

JOHNNY DANIELS IS THE OWNER OF HUBCAP LAWN SERVICE AND HE SOLD THE COMPANY ON DECEMBER 31 2007

AS OF JANUARY 1 2008 THIS COMPANY HAS HAD A CHANGE IN OWNER SHIP. NICOLE MCMILLAN IS NOW THE PRES

OF HUBCAP LAWN SERVICE. SHE OWNENS 51% OF THIS COMPANY AND THE OTHER 49% IS OWNED ELIZABETH HO

ward

(Attach additional pages if necessary)

If an amendment provides for 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)

MS. NICOLE MCMILLAN HOLDS 51% OF THE 2000 SHARE OF STOCK THAT THIS COMPANY HAS AND 49% ELIZABETH

HOWARD OWNS THE REST.

(continued)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 1/1/2008

Effective date if applicable: 1/1/2008
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

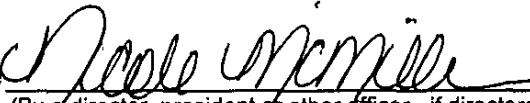
- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each 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
NICOLE MCMILLAN."
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 1 day of JANUARY, 2008.

Signature



(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

NICOLE MCMILLAN

(Typed or printed name of person signing)

CEO

(Title of person signing)

FILING FEE: \$35