P06000049406

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	





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12/27/11--01039--017 **35.00

DIVISION OF CORPORATIONS

EFFECTIVE DATE

COVER LETTER

TO: Amendment Section Division of Corporations

	l enderse		
NAME OF CORPORA DOCUMENT NUMBE	P06000049	and Pest Manage 406	ment, inc.
	Amendment and fee are so		
Picase return all corresp	ondence concerning this ma	atter to the following:	
J	ohn Cross		
	awn Care and	Name of Contact Person d Pest Control	•
4	581 Weston I	Firm/Company Road, Suite 24	11
<u>, v</u>	Veston, FL 33	Address	
_		City/ State and Zip Cod	e
john	hcross@yahc	o.com sed for future annual report	
For further information o	oncerning this matter, plea		nouncation)
John Cross		at (954	319-2515 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status enclosed)	□\$43.75-Filing-Fee-& Certified Copy (Additional copy is (Additional C	S52.50 Filing Fee Certificate of Status Certified Copy topy is enclosed)
Ameno Divisio P.O. B	ing Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle

EFFECTIVE DATE

Articles of Amendment to Articles of Incorporation of

Landscape and Pest Managemen	-V3115055	
(Name of Corporation as currently filed with the	Florida Dept. of State)	
P06000049406	CCL	
(Document Number of Corporation (· ,	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must o	_The new obreviation contain the
B. Enter new principal office address, if applicable:	4581 Weston Road	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite 241	
	Weston, FL 33331	•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4581 Weston Road	
	Suite 241	
	Weston, FL, 33331	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		
Name of New Registered Agent N/A		
(Florida st	reet address)	11 11
New Registered Office Address:	, Florida	DEC SION ECKR
(City)		FILED STAIL SECRETARY OF STAIL VISION OF CORPORATION 1 DEC 27 PM 4: 40
		PH CRPO
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		LED STAIL CORPORATIONS
	, 3	O SHO
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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add-	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Remove		N/A ·	
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

 If amending or adding additional Arti- (attach additional sheets, if necessary). 	icles, enter change(s) here: (Be specific)
V/A	
	The state of the s
	The state of the s
	,
·	
If an amendment provides for an exchange provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
I/A	
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) a	doption: December 20, 2011
Effective date if applicable: Ja	anuary 1, 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval
by	(voling group)
	(voting group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
_{Dated} Dece	mber 21, 2011
Signature	prector, president or other officer – if directors or officers have not been
	d, by an incorporator – if in the hands of a receiver, trustee, or other court
	ted fiduciary by that fiduciary)
	John Cross
	(Typed or printed name of person signing)
	PSTD
	(Title of person signing)