P0000076236

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: BOYNTON PRIGATION WC. DOCUMENT NUMBER: P6600076236 The enclosed Articles of Amendment and fee are submitted for filing Please return all correspondence concerning this matter to the following: RICHARD BOYNTON
Name of Contact Person P.O. Box 2385

MANCO SLAW, FL 34/46

City/ State and Zip Code thompsoning igation exeathlink net
E-mil address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$**43,75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy

is enclosed)

Articles of Amendment

Articles of Incorporation of

FILED

BOYNTON /RRIGATION INC.	2017 NOY - 7 AN 11: 41
(Name of Corporation as currently fi	led with the Florida Dept. of State)
P06000076236	FALLOR OF ENTRY SALES FLORIDA
PO 60000 76236 (Document Number of Co	orporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	erida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co word "chartered," "professional association," or the abbreviation "P.2"	". A professional corporation name must contain the 1."
B. Enter new principal office address, if applicable:	2931 4 NE NE
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	2931 4 AVE. NE NAPLES, FL 34120
	, , , , , , , , , , , , , , , , , , , ,
	110
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	· ·
D. If amending the registered agent and/or registered office address	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent V/A	
(Florida street	address)
New Registered Office Address: D/A	ty) (Zip Code)
/	(Z.fp C.rae)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position.
1	
\mathcal{N}/\mathcal{A}	
Signature of New Regi	istered 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:

 $P \sim President; \ V = Vice\ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	V	DAN WILMATH	3718 SE 67 AVE CAPE CORAL, FL
Add Remove			CAPE CORAL, FL 33904
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Damara			

nch additional sheets, if necessary).	(Be specific)
<u> </u>	
n amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
ovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
	va va se sa sua ca culante
DAN WILMATH	YP, HAS RETURNED HIS 100 SHARES
OF STOCK AND	AS OF NOVEMBER 1, 2017, 15 NO
LAUGAR AN FAR	AS OF NOVEMBER 1, 2017, 15 NO OYET OF BOYNDON IRRIGATION, INC.
COPOCIC AN CALL	20105
	

The date of each amendment(s) adoption: \(\begin{align*} \O \nabla \in N \rightarrow \in \infty \rightarrow \infty \in	, if other than the
Effective date if applicable: NOVEMBER 1, 2017 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date of document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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	
☐ 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.	
Dated	
(By a director, president of 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)	
PLICHARD BOYNTON (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	