

(Re	equestor's Name)	
(Ad	dress)	·
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	(†)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	*)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
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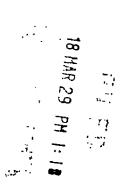


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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Doug Fulford Land Scaping, Inc.
DOCUMENT NUMBER: P0600121462
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Daniel Fulford Name of Contact Person
Daniel Fulford Landscaping, Inc
7100 Beulah Koad
Pensalola, FL 32526 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call;
Daniel Fulford at (450) 516-1680 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment



Articles of Inco	rporation 18 MAR 29 PM 1: 1
Doug Fulto	rd Landscaping Inc
(Name of Corporation as currently	filed with the Florida Dept. of State
(Document Number of	121462 Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Pensalola, FL 32526
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 12961 Pensarola, FL 32591
D. If amending the registered agent and/or registered office addressed new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent Joy Fyl- 7100 Prulat (Florida stree	Ford Boad, Pensacola, FL 32526
New Registered Office Address: 7100 Bulk R	d. Pensalola, Florida 32526 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.

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.

	ve, and Sany Smun, SV as an Ada.	
Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	Pt Doug Fulfo	rd 32964 Juniper Rd.
Add Remove	•	Seminole, AL 36574
2) ChangeAdd	P Daniel Ful	Ford 7100 Beulah Acad Pensarola, FL32526
Remove 3) Change Add	V Joy Fulfi	ord 7100 Beulah Boad Pensarola, FL 32526
Remove		
4) Change		
Add		
Remove		
51 Change		
Add		
Remove		
6) Change		
Add		
Remove		

Attach <i>additional s</i>	ding additional Artheets, if necessary).	(Be specific)				
						
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provisions for im	provides for an exc plementing the am able, indicate N A)	thange, reclassi	fication, or cance contained in the s	llation of issued s amendment itself	<u>hares,</u>	
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The date of each amendment(s) adoption: January 1, 2018 if other than to date this document was signed.
Effective date if applicable: (no more than 90 days) fier amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted 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
(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.
Dated 3 24 18 Signature Janes O. Frederick
(Dy 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)
Typed or printed name of person signing)
President (Title of person signing)
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