## P01000008440

| Steven whoa 18223 Cypress Hoven Drive Tampa, FL 33647  (Address) | - |  |
|--|---|--|
| (City/State/Zip/Phone #)   | _ |  |
| PICK-UP WAIT MAIL  |   |  |
| (Business Entity Name)   | - |  |
|  |   |  |
| (Document Number)  |   |  |
| Certified Copies Certificates of Status                          | - |  |
| Special Instructions to Filing Officer:                          | ] |  |
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10/28/11--01009--007 \*\*35.00

DIVISION OF CORPORATION
11 OCT 28 AM 8: 54

St. Marie St. Ma

## Articles of Amendment to Articles of Incorporation of

## **BAY WILLOW LAWN SERVICE INC**

|  | <del> </del>  | 10                                  |
|--|---|-------------------------------------|
| (Name of Corporation as o  | currently filed with the Florida  | Dept. of State)                     |
| F  | 207000008440  |                                     |
| (Document  | Number of Corporation (if know  | vn)                                 |
| suant to the provisions of section 607, endment(s) to its Articles of Incorporation  |   | orida Profit Corporation adopts the |
| If amending name, enter the new nan  | ne of the corporation:  |                                     |
| ne must he distinguishable and conte   |   | The                                 |
| ne must contain the word "chartered,"  Enter new principal office address, if incipal office address MUST BE A STI                       | applicable:   | 7. U.A., CPMIN/O 1.71.              |
|  | ············  |                                     |
| Enter new mailing address, if applications (Mailing address MAY BE A POST O  |   |                                     |
| (Mailing address MAY BE A POST O   | /or registered office address in  | Florida, enter the name of the      |
| (Mailing address <u>MAY BE A POST O</u>  | FFICE BOX)  /or registered office address in registered office address:       |                                     |
| (Mailing address <u>MAY BE A POST O</u>  | /or registered office address in  |                                     |
| (Mailing address MAY BE A POST O   | FFICE BOX)  /or registered office address in registered office address:       | LOA                                 |
| (Mailing address MAY BE A POST O   | /or registered office address in registered office address:  STEVEN THOMAS UL | LOA<br>/EN DR                       |
| (Mailing address MAY BE A POST Of It amending the registered agent and new registered agent and/or the new Name of New Registered Agent: | /or registered office address in registered office address:  STEVEN THOMAS UL | LOA<br>/EN DR                       |

Page 1 of 3

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)

| <u>Title</u> | <u>Name</u>  | Address                                   | Type of Action    |
|--------------|--|---|-------------------|
| <u>P/D</u>   | OLINDA A ULLOA   | 18223 CYPRESS HAVEN DR<br>TAMPA, FL 33647 | ☐ Add<br>☐ Remove |
| <u>P</u>     | STEVEN THOMAS ULLOA  | 18223 CYPRESS HAVEN DR<br>TAMPA, FL 33647 | ☐ Add ☐ Remove    |
|              |  |   | Add Remove        |
|              | ling or adding additional Articles, entereditional sheets, if necessary). (Be spec                   |   |                   |
|              |  |   |                   |
| provisio     | nendment provides for an exchange, reals for implementing the amendment if applicable, indicate N/A) |   |                   |
|              |  |   |                   |
|              |  |   |                   |
|              | •.   |   |                   |
|              |  |   |                   |

| The date of each amendmen  | t(s) adoption: 10/20/2011   |
|--|---|
| Effective date <u>if applicable</u> :  | (date of adoption is required)  |
| \(\frac{1}{2} \cdot \cdo | (no more than 90 days after amendment file date)  |
| S.   |   |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )  |
|  | ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.  |
|  | ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.   | ere adopted by the board of directors without shareholder action and shareholder  |
| The amendment(s) was/we action was not required.   | ere adopted by the incorporators without shareholder action and shareholder   |
| Dated_10/2   | 20/2011   |
| Signature  | Olinda UDOZ   |
|  | a director, president or other officer – if directors or officers have not been   |
|  | ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)                                   |
|  | OLINDA A ULLOA  |
|  | (Typed or printed name of person signing)   |
|  | (1.) pad or printed timine or person organis)   |
|  | PRESIDENT   |
|  | (Title of person signing)   |