Po7000022523

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(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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TO: Amendment Section

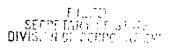
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: Super Turf, INC. DOCUMENT NUMBER: P0700022523				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Bruce C. Carter Name of Contact Person Super Turf, Inc Firm/ Company				
POBOX 728				
Indiantown FL 34956 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Bruce C. Carter at (56) 718-9184 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: \$\sum_{35}\$ Filing Fee \times \text{\$\sum_{343.75}\$ Filing Fee & Certificate of Status (Additional copy is enclosed)} \$\sum_{35}\$ Filing Fee \times \text{\$\sum_{352.50}\$ Filing Fee & 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 to Articles of Incorporation of



Super Turf, Inc	15 NUV -5 AM 9: 57
(Name of Corporation as currently	filed with the Florida Dept. of State)
P070000 22523	
(Document Number of	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:	
name must be distinguishable and contain the word "corporation,	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	B&C Management Inc
(Principal office address MUST BE A STREET ADDRESS)	13855 SE 38th Street
	DKeechober, FL 34974
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	PO Box 728
	Indiantown, FL 34954
	<u> </u>
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered AgentN.A.	
	· · · · · · · · · · · · · · · · · · ·
(Florida stree	et address)
New Registered Office Address:	. Florida
· · · · · · · · · · · · · · · · · · ·	City) (Zip Code)
Now Degistered Agent's Signature if shapping Degistered Agent.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
N.H.	
Signature of New Re	gistered 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 <math>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 Do	<u>be</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>		
Type of Action (Check One)	Title		Name	. 4	Address
1) Change	·····			_	
Add				_	
Remove				_	
2) Change					
Add		_			
Remove					
3) Change				_	
Add					
Remove				_	
. Change					
4) Change Add				_	
Add Remove				_	· · · · · · · · · · · · · · · · · · ·
Kemove				_	
5) Change	-	_			
Add			,	_	
Remove					
6) Change		_			
Add		-	· · · · · · · · · · · · · · · · · · ·	_	
Pemove					

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
4. 4	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, indment if not contained in the amendment itself:

The date of each amendment(s) adoption:
date this document was signed.
Effective date if applicable: 10312015 (no more than 90 days after amendment file date) 5 NOV -5 AM 9: 57
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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_10 31 2015
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)
Bruce C. Canter
(Typed or printed name of person signing)
President
(Title of person signing)