P08000004476

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SECRETARY OF STATE OF VISION OF CORPORATION

JAN - 5 2017

C LEWIS

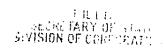
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Jax Lawn & lands	cape Inc.	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.	
Please return all corres	spondence concerning this ma	atter to the following:	
	CHRISHOPHER PERCIVA	L	
		Name of Contact Perso	n
	N/A		
		Firm/ Company	
	2753 CLARA RD		
		Address	
	JACKSONVILLE FL 32216	i	
		City/ State and Zip Cod	e
ONES	SOURCECARE@GMAIL.C	ОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
CHRISTOPHER PER	CIVAL	at (2985596
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is 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

Articles of Amendment to Articles of Incorporation of



JAX LAWN & LANDSCAPE INC.

2017 JAN -3 AM 9: 45

(Name	of Corporation as curre	ntly filed with the Florida Dept. of State)
P08000004676		
	(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new n	ame of the corporation:	
ONESOURCE GROUNDS CARE $ \mathcal{I} $	nc.	The new
	nation "Corp," "Inc," or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
3. Enter new principal office address, if applicable:		N/A
Principal office address MUST BE A S		
. Enter new mailing address, if appl	icable:	NIA
(Muiling address MAY BE A POST		N/A
 If amending the registered agent an new registered agent and/or the new 		Idress in Florida, enter the name of the
-	N/A	<u></u>
Name of New Registered Agent		
		street address)
New Registered Office Address:	N/A	, Florida
·		(City) (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Age	nt:
hereby accept the appointment as regist	ered agent. I am familia	r with and accept the obligations of the position.
	G: Chi	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 <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.

Mike Jones, V as Remove Example:	, and Sal	ly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
Kemove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
//A	
	<u> </u>
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
or implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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:
orovisions 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:
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:
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

	12/29/2016			
The date of each amendment(s)	adoption:			, if other than the
date this document was signed.	•		1 LL 1 V RAT succus	L DF start
Effective date if applicable:			SECRETARY SIVISION OF CO	ŘECEAL
<u>appitubte</u> ,	(no more than	90 days after amendment file do	2017 JAN -3	AH 9: 45
Note: If the date inserted in this document's effective date on the E	block does not meet the app			
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. Trufficient for approval.	he number of votes cast for the a	mendment(s)	
☐ The amendment(s) was/were ap must be separately provided for		nrough voting groups. The follow to vote separately on the amendn		
"The number of votes cas	t for the amendment(s) was/w	ere sufficient for approval		
by	(voting group)			
	(voting group)			
☐ The amendment(s) was/were ac action was not required.			l shareholder	
The amendment(s) was/were ac action was not required.	lopted by the incorporators wi	ithout shareholder action and sha	reholder	
12/29/201 Dated	6			
Signature <u>C</u>	M			
(By a select	åirector, president or other of	ficer – if directors or officers have the hands of a receiver, trustee, or y)		
	CHRISTOPHER PERCIVA	AL .		
	(Typed or printed	d name of person signing)		
	PRESIDENT			
	(Title	e of person signing)		