P0900055280

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300374409943

10/06/21--01004--022 **35.00

SECREDATIONS THE TALLAHASSEE STATE

FILED &

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Green Tech Termitle of Pest Control				
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Name of Contact Person Green Tech Terrnite & Pest Firm/ Company 1395 Belcher Rd. Address PalmHarley Fl 341083 City/ State and Zip Code Nicki D greentech Pest Control. Com				
E-mail address: (to be used for fundre annual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at (72)				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation of

(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Pro</i> its Articles of Incorporation:	fit 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," "company," of "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profession "chartered," "professional association," or the abbreviation "P.A."	
	202 ∵ T.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	Sign of Line
- 1	nis.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(7447)	
	8
D. If amending the registered agent and/or registered office address in Flori	ids enter the name of the
D. If amending the registered agent and/or registered office address in Flor- new registered agent and/or the new registered office address:	ida, enter the name of the
new registered agent and/or the new registered office address:	ida, enter the name of the
	ida, enter the name of the
new registered agent and/or the new registered office address: Name of New Registered Agent	ida, enter the name of the
Name of New Registered Agent (Florida street address)	
new registered agent and/or the new registered office address: Name of New Registered Agent	. Florida
new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address:	Florida
new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address:	Florida
New Registered Agent's Signature, if changing Registered Agent:	Florida
Name of New Registered Agent (Florida street address) New Registered Office Address: (City)	Florida
New Registered Agent's Signature, if changing Registered Agent:	Florida
New Registered Agent's Signature, if changing Registered Agent:	Florida

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)

Example:

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.

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)	<u>Title</u>	Name	<u>Addres</u> s
Change Add		Karen Nabozny	339 Franch Rd Tarpon Springs Fl 341288
Remove			<u>34488</u>
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			rate many
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
9/17/21 nichal Chandler	26	%
" Danielle Enlandson	25	%
" Frank nalyony	24	%
Karen nalvoyneg	25	0/
		·····
		
		<u>-</u>
		,
f an amendment provides for an exchange, reclassification, or cancellation of issued share provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	<u></u>	
		. <u>.</u>
		
		
	<u> </u>	

· · · The date of each amendment(s) adoption	n:10 <i>14</i>	12021	, if other than the
date this document was signed.		, f	
Effective date <u>if applicable</u> :	(no more than 9	days after amendment)	file date)
Note: If the date inserted in this block do document's effective date on the Departme		cable statutory filing requ	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators, or l	board of directors withou	nt shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficien		e number of votes cast fo	or the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each v			
"The number of votes cast for the	amendment(s) was/we	re sufficient for approval	ı
by Shan	breen tec	ri G	
v	(voting group)		
Dated	0/4/202	21	
Signature 7 LLC	has co	andles	
(By a director, selected, by a	, president or other offic	cer – if directors or office e hands of a receiver, tru)	
	nicho	oname of person signing)	Her
	(Typed or printed	name of person signing)	
	Pre	sident	
	(Title of person sig	gning)	