## P09000102489

(Requestor's Name)
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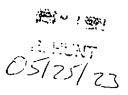
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DIVISION OF CORPORATIONS



## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: FLORIDA ENVIR	RONMENTAL PEST MAN	AGEMENT INC.			
DOCUMENT NUM	P09000107489					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corr	respondence concerning this ma	itter to the following:				
	STEPHANIE L HOWELL					
	Name of Contact Person					
	FLORIDA ENVIRONMENTAL PEST MANAGEMENT INC.					
	Firm/ Company					
	3685 Cabbage Palm Way					
	Address					
	LOXAHATCHEE, FL 33470					
		City/ State and Zip Code	e			
	stephanie@florida-environm	ental.com				
	E-mail address: (to be us	sed for future annual report	notification)			
For further informati	ion concerning this matter, pleas					
Name	e of Contact Person	Area Co	) de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section			Address ment Section			
Division of Corporations		Divisio	n of Corporations			
P.O. Box 6327			entre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

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2023 HAY 25 PH 12: 40

## Articles of Amendment to Articles of Incorporation of

FLORIDA ENVIRONMENTAL PEST MANAGEMENT, INC.

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

(Name of Corporation as cur	rrently filed with the Florida Dept. of State)	_
P09000102489		
(Document Numb	nber of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	a, this Florida Profit Corporation adopts the following	g amendment(s)
A. If amending name, enter the new name of the corporation	on:	
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp." "Inc," or "Co "chartered," "professional association," or the abbreviation "I	". A professional corporation name must contain	_The new n "Corp.," n the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
<ul> <li>C. Enter new mailing address, if applicable:         (Mailing address MAY BE A POST OFFICE BOX)</li> <li>D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add</li> </ul>		2013 HAY 25   PH 12: 40
Name of New Registered Agent	MIX.	
(Florid New Registered Office Address:	ida street address) , Florida	
in the same of the	(City) (Zip C	ode)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am family Signature, of X		
	ест кедіметей яқет, у спандту	
Check if applicable		

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>	<u>Name</u>	<u>Addres</u> s	
I) X Change	P. D	HOWELL, RONALD JII	3685 Cabbage Palm Way	
Add			LOXAHATCHEE, FL 33470	
Remove	VP. D	HOWELL, STEPHANIE L	3685 Cabbage Palm Way	
2) X Change			LOXAHATCHEE, FL 33470	
Add			EOXARATCHEE, FL 35470	
Remove 3 ) X Change	S. D	Howell, Ethan E	18934 44th Place North	
Add			LOXAHATCHEE, FL 33470	
Remove				
4) Change				
Add				
Remove				
51 Change				
Add				
Remove			202	
6) Change	···			
Add			2023 MAY 25	
Remove				

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THE SALE THE STATE OF STATE

The date of each amendment(s) ado	January 1, 2023	, if other than th
date this document was signed.	,	II olilei tillai ili
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action	and shareholder
■ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ich voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated		DIVISION C 2023 HAY
Signature	Stowell	ON OF U
	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court	c) ™,
appointed	I fiduciary by that fiduciary)	22 75.00 1.50 1.50
S	tephanie Howell	OF STATE REPORATE PH 12: 40
_	(Typed or printed name of person signing)	<b>_</b>
\	fice President	

(Title of person signing)