# P11000015837

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ALLAHASSEE FLORICA

Amend

FEB 24 2016 I ALBRITTON

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ARTERRA LAND SCAPE, INC.  DOCUMENT NUMBER: P11000075837
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
REBECCA FRUEHLING
ARTERRA LANDSCAPE, INC.
1128 ROYAL PALM BEACH BLVD # 40
ROYAL PALM, F1 33411  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
REBECCA FRUEHLING at 561, 722.1590
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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certificate of Status    \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)    \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation

## ARTERRA LANDSCAPE, INC. (Name of Corporation as currently filed with the Florida Dept. of State)

## P1100007583

(Document Number of Corporation (if known)

name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "In- word "chartered," "professional association," or the abbre	c," or "Co". A profession		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	9)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	·		2016 FEB 22 PH
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office  Name of New Registered Agent		er the name of the	PH 12: 00
· · · · · · · · · · · · · · · · · · ·	lorida street address)	,	
New Registered Office Address:	(City)	, Florida_	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		obligations of the po	osition.
	of New Registered Agent, if c	hansies	

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 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>oe</u>			
X Remove		<u>v</u>	Mike Jo	<u>ones</u>			
X Add		<u>sv</u>	Sally Si	nith			
Type of Action (Check One)		<u>Title</u>		Name		<u>Addres</u> s	
1) Change	P	宴	<u> </u>	REBECC	-A FRUEHLING	13295 60th STS	
X_ Add						wellington, FI 33449	7
Remove							
2)Change		7	_	JAMES	HIMMEL	3000 A Rd	
Add			•			Loxahatchee, Fl 33	47C
X Remove							
3) Change			_				
Add							
Remove							
4) Change			_				
Add							
Remove							,
5) Change							
Add							
Remove							
6) Change			_				
Add							
Remove							

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	f amending or adding additional Arti Attach <i>additional sheets, if necessary).</i>	(Be specific)
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		(, , , , , , , , , , , , , , , , , ,
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(if not applicable, indicate N/A)	provisions for implementing the ame	endment if not contained in the amendment itself:
	(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 114 2016 date this document was signed.	, if other than th
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	e will not be listed as th
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 stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	r
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1/14/2016	
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 courappointed fiduciary by that fiduciary)	t
LAMES MINORE	
JAMES HIMMEL (Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	