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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: READ	YGREEN LAW	N CARE SERVICE I	NC.
DOCUMENT NUMBER: P11000083	05		
The enclosed Articles of Amendment an	d fee are submitt	ed for filing.	
Please return all correspondence concerr	ning this matter to	the following:	
MOISES ARCE			•
	Name o	f Contact Person	
MOISES ARCE 30 EA	ፍተ ፈስ ሀነላ፤ ሮላ ነ	J EI 22012	
MOISES ARCE SO EA		n/ Company	· · · · · · · · · · · · · · · · · · ·
30 EAST 60 STREET			
30 E/(ST 00 STREET	·	Address	
LIMITAL EL 22012			
<u>HIALEAH, FL. 33013</u>	City/ Sta	ite and Zip Code	
	-	•	
<u>READYGREENLC@G</u>	MAIL,COM		
E-mail addres	ss: (to be used to	future annual report	notification)
For further information concerning this n	natter, please cal	:	
MOISES ARCE		at ( <u>305</u>	) 979-2048
Name of Contact Person		Area Cod	le & Daytime Telephone Number
Enclosed is a check for the following am	ount made payab	le to the Florida Depa	rtment of State:
☑ \$35 Filing Fee ☐\$43.75 Filing Certificate of	of Status C	43.75 Filing Fee & ertified Copy Additional copy is nclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns	Divisior Clifton l	Address nent Section of Corporations Building recutive Center Circle

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 22, 2011

MOISES ARCE 30 EAST 60 ST HIALEAH, FL 33013

SUBJECT: READYGREEN LAWN CARE SERVICE INC

Ref. Number: P11000083105

We have received your document for READYGREEN LAWN CARE SERVICE INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You must complete your application, you have nothing showing on the page for the signature and manner of adoption.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 611A00028483

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

READYGREEN LAWN CARE SERVICE INC	· ·•		
	ntly filed with the Florida Dept. (	of State)	-
P11000083105			
(Document Numb	ber of Corporation (if known)	<del>```</del>	-
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this <i>Florida F</i>	Profit Corporation adopts the fo	llowing
A. If amending name, enter the new name of	the corporation:		
READYGREEN LANDSCAPE MANAGEMEN			
The new name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or the c name must contain the word "chartered," "profe	designation "Corp," "Inc," or "C	o". A professional corporation	
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET			
	<del></del> /		
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	E BOX)		
	<del></del>		
	, a	· <del></del>	
D. If amending the registered agent and/or re- new registered agent and/or the new registered		, enter the name of the	
	_		
Name of New Registered Agent:			
	(Florida street address)		
New Registered Office Address:	(0)	, Florida	
	(City)	(Zip Code)	
		<b>-</b> 4	
New Registered Agent's Signature, if changing	Registered Agent:	À C	12
I hereby accept the appointment as registered age	ent. I am familiar with and accep	the obligations of the position,	
			-
Signature of	of New Registered Agent, if change	ing Sh	
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		<b>,</b>	

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If AMENDIN	G the Offi	cers and/or Directors, ple	ase list all officers/d	lirectors of the corpora	tion as you now want
Our database	be. Please i	ndicate the title(s), name sup to 6 officers/directors.	and address for each	officer/director.	places list than on an
additional she		up to o officers unrectors.	ij you nave more ii	un o ojjicers/uireciors,	preuse usi them on un
Title(s)	,	Name	Ad	dress	
1)					
-/					
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2)					
3)					
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4)		<del></del>		·	
5)					
<b>,</b>					
			<del></del>	<u> </u>	<del></del>
6)					
			_		
If REMOVIN	G an office	r and/or director, please li	ist the title(s) and na	me of the officer/directo	or to be removed:
Title(s)	<u>Name</u>		Title(s)	<u>Name</u>	
1)		· · · · · · · · · · · · · · · · · · ·	4)	<del> , , , ,</del>	
2)	······································		5)	·····	<u> </u>
3)	_=		6)		

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If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)			
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F. . 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) The date of each amendment(s) adoption: \_ Effective date if applicable: (no more than 90 days after amendment file date) 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 (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. 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) MOISES ARCE
(Typed or printed name of person signing)

(Title of person signing)