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To:

Division of Corporations

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From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257

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ı (850)224-8870

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MAY 2 9 2012 T. ROBERTS

5/25/2012



May 25, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

POLAR BEAR LANDSCAPES INC. FO BOX 15 ALDIE, VA 20105US

SUBJECT: POLAR BEAR LANDSCAPES INC.

REF: P12000038447

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is m03000003982 - CYPRESS MANAGEMENT, LLC.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II FAX Aud. #: H12000139339 Letter Number: 112A00015320

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SEPARTITENTO SAFE.
2012 NAY 29 PM 8: 05
ROLLINTENCES
10 AFFICIATION OF REING

P.O BOX 6327 - Tallahassee, Florida 32314

MAY. 29. 2012 11:56AM

Articles of Amendment Articles of Incorporation of

FILED 2012 MAY 29 PM 3: 19 SECRETARY OF STATE

POLAR BEAR LANDSCAPES INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000038447

(Document Number of Corporation (if known)

amendment(s) to

ts Articles of Incorporation:	
A. If amonding name, enter the new name of the corporation:	
CYPRESS LANDSCAPE, INC.	The
name must be distinguishable and contain the word "corporation," "company," "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A profess word "chartered," "professional association," or the abbreviation "P.A."	or "incorporated" or the abbrevi
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>),	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida. new registered agent and/or the new registered office address:	enter the name of the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	. Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	

Signature of New Registered Agent, if changing

Example:

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.

X_Change	PT lo	hn Doe	
X Remove	<u>У</u> <u>М</u> і	ike Jones	
_X Add	SY Sa	<u>lly Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change X Add Remove	<u></u>	Lynn Cliffon Shiferdek	13984 Webb Ro JACKSONVIlle, FL 32218
2) Change Add Remove	 _		
Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6)Change Add Remove			

NO. 0343	Ρ.	5
MO: ATAT	1.	,

MAY. 29. 2012 11:57AM CAPITAL CONNECTION____

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mending or adding additional Arti tach additional sheets, if necessary).	(Be specific)
	NOW
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on amandonent nuovidae fox an avab	honne replactification or transplation of itsued sharps.
rovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
(A not abhavonose, indicate (AV)	ULA

	5/14/in
The date of each amendment(s) adopti	ion:
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 was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval,
The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting groups. The following statement in voting group entitled to vote separately on the amendment(s):
"The number of votes cast for t	he amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	i by the incorporators without shareholder action and shareholder
Dated MA	25,2012
Signature_	-> LL
(By a direct	tor, president or other officer - if directors or officers have not been
selected, by	y an incorporator - if in the hands of a receiver, trustee, or other court
apponited	fiduciary by that fiduciary)
•	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
- -	Presisons
	(Title of person signing)