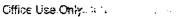
P14000038109

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		,
l		





800267064348

12/08/14--01041--016 **39.00



Amend a H12/14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ACOSTA T	REE SERVICE	INC		
DOCUMENT NUMB	ER: P1400003810	9			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	GENARO ACOSTA				
-		Name of Contact Persor	l		
	ACOSTA TREE SERVICE INC				
·		Firm/ Company			
_	15300 SAN DIEG	O DR			
	LOVALIATORE	Address			
	LOXAHATCHEE	<u>'</u>			
	•	City/ State and Zip Code			
INT	EGRALCL@AOL				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
HEIDY BRITO		at (561	, 9668141		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301		

Articles of Amendment to Articles of Incorporation of



ACOSTA TREE SERVICE INC

(Name of Corneration as curren	ently filed with the Florida Dept. of State)	
P1400038109	Mily med with the Florida Dept. of State	
(Document Numl	nber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation;	Florida Statutes, this Florida Profit Corporation adopts the following	owing amendment(s) to
A. If amending name, enter the new name of	f the corporation:	
		The new
	he word "corporation," "company," or "incorporated" or ti "Corp," "Inc," or "Co". A professional corporation name n or the abbreviation "P.A."	
B. Enter new principal office address, if application (Principal office address MUST BE A STREET)	dicable: TADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	CE BOX)	
D. If amonding the unsigted and another de-	Cabanada 664-a addana in Elavida andanada anna Caba	
new registered agent and/or the new regis	registered office address in Florida, enter the name of the stered office address:	
Manta of Many Popintaned Agent		
Name of New Registered Agent		
• •	(Florida street address)	
·	(From Mastreet address)	
New Registered Office Address:	, Florida (Zip Code	
	(only)	•
	·	
New Registered Agent's Signature, if changin	ng Registered Agent:	
I hereby accept the appointment as registered ag	gent. I am familiar with and accept the obligations of the posit.	ion.
Signature	re of New Registered Agent, if changing	

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 Doe	
$\cdot \underline{X}$ Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add Remove			
4) Change			
Add		· · · · · · · · · · · · · · · · · · ·	
Remove			
5) Change			
Add			
Remove			***************************************
6) Change		·	
Add			
Remove			•

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ARTICLE IV
THE NUMBER OF SHARES THE CORPORATION IS AUTHORIZED TO ISSUE SHALL
BE 100 INSTEAD OF 1000
•
^
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)
N/A
,

The date of each amendment(s) adoption: 12/02/2014	if other than the
date this document was signed.	
Effective date if applicable:	<u></u>
(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 east 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 shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/02/2014	
Signature CEVARO ACOSTA	
(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)	
GENARO ACOSTA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	