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## COVER LETTER

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION: HEARTLAND MOSQUITO	CONTROL, INC.			
DOCUMENT NUMBER: P14000052103				
The enclosed Articles of Amendment and fee are submitted for	or filing.			
Please return all correspondence concerning this matter to the	following:			
William K. Brantley, II				
Name	of Contact Person			
Heartland Mosquito Constrol, Inc.				
Fi	rm/ Company			
417 E Interlake Blvd.				
	Address			
Lake Placid, FL 33852				
City/ S	tate and Zip Code			
bill@brantley.pro				
E-mail address: (to be used for fut	ure annual report notification)			
For further information concerning this matter, please call:				
William K. Brantley II	at ( 863 ) 441-2659			
Name of Contact Person	Arca Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
Certificate of Status Certi	75 Filing Fee & \$\sum \\$\$52.50 Filing Fee fied Copy Certificate of Status tional copy is Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

## Articles of Amendment

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## Articles of Incorporation

of

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HEARTLAND MOSQUITO CONTROL, INC.	
(Name of Corporat	tion as currently filed with the Florida Dept. of State)
P14000052103V	
/Dogw	ment Number of Corporation (if known)
(1)(1)	ment Number of Corporation (if Known)
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the c	orporation:
	The new
name must be distinguishable and contain the wow "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" or the abbreviation p," "Inc," or "Co". A professional corporation name must contain the eabbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>2X</u> )
D. If amending the registered agent and/or registe	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Resilier I hereby accept the appointment as registered agent.	gistered Agent:  I am familiar with and accept the obligations of the position.
Sign	nature 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:	re, unu na	ny comin, cir us un riad.		
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>	Name	Δ.	<u>ldres</u> s
1) Change	V	William K. Brantley III	417	7 E. Interlake Blvd.
X Add			La	ke Placid, FL 33852
Remove				· · · · · · · · · · · · · · · · · · ·
2) X Change	P	William K. Brantley II	417	7 E. Interlake Blvd.
Add			Lal	ke Placid, FL 33852
Remove		;	_	
3 ) Change		_	<del></del>	
Add				
Remove				
4) Change				
Add			_	
Remove			<u></u>	
5) Change				
Add			_	· · · · · · · · · · · · · · · · · · ·
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Articles, enter change Attach additional sheets, if necessary). (Be specific)	
f an amendment provides for an exchange, reclassific	ation, or cancellation of issued shares, ntained in the amendment itself:
(if not applicable, indicate N/A)	
<del></del>	<u> </u>

The date of each amendment(s) add date this document was signed.	ption:	if other than the
Effective date if applicable:		
<u></u>	(no more t	nan 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep		applicable statutory filing requirements, this date will not be listed as the ds.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adop by the shareholders was/were suff	_	The number of votes cast for the amendment(s)
		s through voting groups. The following statement ed to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) wa	 is/were sufficient for approval 
by	(voting group)	."
The amendment(s) was/were adopt action was not required.	ted by the board of dire	etors without shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ted by the incorporators	s without shareholder action and shareholder
May 20, 20 Dated	19 	
selected,		officer – if directors or officers have not been in the hands of a receiver, trustee, or other court ciary)
V	Villiam K. Brantley II	
_	(Typed or pri	nted name of person signing)
P	resident	
_	(	Title of person signing)