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ELZHÄSSEF FLORID

OCT 13 2015

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: MASTER FIELD I	NSPECTIONS INC		
DOCUMENT NUMBI				
The enclosed Articles of	Amendment and fee are sul	omitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
E	SPERANZA GONZALEZ			
_		Name of Contact Person		
N	MASTER FIELD INSPECTI	ONS INC		
_		Firm/ Company		
5	5335 31ST CIRCLE E APT 104			
	Address			
E	BRADENTON, FL 34203			
_		City/ State and Zip Code	-	
master	fieldinspections@gmail.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information ESPERANZA GONZA	concerning this matter, pleas	e call:	301-0644	
Name of Contact Person		at (de & Daytime Telephone Number	
	the following amount made		•	
■ \$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)	
Amer Divis P.O.	ng Address Idment Section Idment Sec	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

15 OCT 12 MHO: 33

MASTER FIELD INSPECTIONS INC

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P14000059908	TALLAHASSEE, FEOLDA
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	prporation:
MASTER FIELD LAWN & CLEAN INC	The new
	d "corporation," "company," or "incorporated" or the abbreviation," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent	
Hante of New Negaterea rigen	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the obligations of the position.
Cia	natura of Now 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	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	JESUS SALAS	2045 4TH ST
XX Add			SARASOTA, FL 34237
Remove			
2) XX Change	VP	ESPERANZA GONZALEZ	5335 31ST CIRCLE E APT 104
Add			BRADENTON, FL 34203
Remove			
3) Change	D	MARIO CASTANON	5335 31ST CIRCLE E APT 104
XX Add			BRADENTON, FL 34203
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		· · · · · · · · · · · · · · · · · · ·	
Add			<u></u>
Remove			

Attach addition	adding additional Artial sheets, if necessary).	(Be specific)			
				·	<u> </u>
			 		
					-
-			 		
f an amendme	nt provides for an excl	ıange, reclassific	ation, or cancells	ation of issued sha	ires.
provisions for	implementing the ame	ndment if not co	ntained in the an	nendment itself:	
(ij noi app	licable, indicate N/A)				
					
			 _		

10/09/2015	
The date of each amendment(s) adoption:	, if other than the
10/01/2015 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 date document's effective date on the Department of State's records.	will not be listed as the
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):	r
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(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	
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)	
ESPERANZA GONZALEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	