P1400098783

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: VAIL LAWN CAF	RE SERVICES	S INC	
DOCUMENT NUMB	P1400008783			
The enclosed Articles	of Amendment and fee are st	ubmitted for fili	ng.	
Please return all corres	spondence concerning this ma	uter to the follo	wing:	
	JERONIMO VAIL LOPEZ			
		Name of Co	ontact Person	1
	VAIL LAWN CARE SERV	ICES INC		
		Firm/ (Company	· · · · · · · · · · · · · · · · · · ·
	1113 CHOCTAW ST			
		Ad	dress	
	JUPITER FL 33458			
		City/ State a	and Zip Code	e
For further information	E-mail address: (to be u		nnual report	notification)
JERONIMO VAIL LOPEZ		at (_) <u>951-4202</u> _)
Name o		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the l	Florida Depa	rtment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified ((Additiona enclosed)	Сору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 2018 AUG 17 PM 4: 42

VAIL LAWN CARE SERVICES INC

VAIL LAWN CARE SERVICES INC	GEOGRAPH
(Name of Corporation as current	tly filed with the Florida Dept. of State) TALLAHASSEE, F
P14000098783	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	; Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1113 CHOCTAW ST
(Principal office address MUST BE A STREET ADDRESS)	JUPITER FL 33458
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Muting dutiess MALI BENTION VITTE MON	
	
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office addres	<u>is:</u>
Name of New Registered Agent	
(Florida si	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
n n de	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	<u>u</u> with and accept the obligations of the position.
, merch, decept our approximation and agree and agree of	, ,
	17-1
Signature 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 Do	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	nes .		
X Add	<u>sv</u>	Sally St	nith		
Type of Action (Check One)	Title		Name		Address
1) Change	Р	_	JERONIMO VAIL LOPEZ		1113 CHOCTAW ST
X Add					JUPITER FL 33458
Remove					
2) X Change	TREAS	S	AUDELIO R VAIL LOPEZ		14409 66TH TRAIL N
Add					WEST PALM BEACH FL 33418
Remove					
3) Change		_			
Add					
Remove					
4) Change		_		<u></u>	
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change					
Add		_			
Remove					

чиаси <i>ааагионаг</i>	dding additional Ar sheets, if necessary).	(Be specific)				
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f an amendment	provides for an exemplementing the am	hange, reclassifica	ition, or cancella	tion of issued shandment itself:	ares,	
(if not applie	cable, indicate N/A)	entinient ii not coi	mamed in the ain	endinent usen.		
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	08/15/2018	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	0.1.7.100.10	
0 _ Effective date <u>if applicable</u> :	8/15/2018	
isnective date <u>ii applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendme sufficient for approval.	nt(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareho	older
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/15/2	2018	
Dated		
Signature		
	a director, president or other officer - if directors or officers have not be	
	eted, by an incorporator – if in the hands of a receiver, trustee, or other or	ourt
арр	ointed fiduciary by that fiduciary)	
	JERONIMO VAIL LOPEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	