P150000 85 834

(Requestor's Name)	
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(Business Entity Name)	
(Document Number)	
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Amend

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: Clean Cut Lawn S	ervices of Lee County, Inc.				
	IBER: P15000085834					
	s of Amendment and fee are su	ibmitted for filing.				
Please return all cort	espondence concerning this ma	atter to the following:				
	William Lusk					
		Name of Contact Person	n			
	Clean Cut Lawn Services of Lee County, Inc.					
		Firm/ Company				
	15694 Angelica Dr	. ,				
		Address				
	Alva / FL 33920					
		City/ State and Zip Cod	e			
clea	ncutlawnservicesllc@gmail.co	nı				
	 -	sed for future annual report	notification)			
		· •	·			
For further informati	on concerning this matter, plea	se call:				
William Lusk		at (810-9220 de & Daytime Telephone Number			
Name	e of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section in of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Clean Cut Lawn Services of Lee County, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P15000085834 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.." or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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, enter the name of the new registered agent and/or the new registered office address: William Lusk Name of New Registered Agent 15694 Angelica Dr (Florida street address) Alva New Registered Office Address: (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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: XChange	<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	PCEO	Aimee Lusk	15694 Angelica Dr
Add X Remove			Alva, FL 33920
2) X Change	PCEO	William Lusk	15694 Angelica Dr
Add			Alva, FL 339270
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)			
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	 		<u>-</u>	
f an amendment provides for an exch provisions for implementing the ame	ange, reclassification	n, or cancellation	of issued shares,	
(if not applicable, indicate N/A)	<u></u>			
		•		
				-
		 		
				 -

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
March 19 Dated	9, 2019	
Signature 👃	- Anstat/060	
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	William D Lusk	
	(Typed or printed name of person signing)	
	President / CEO	
	(Title of person signing)	