

(Re	equestor's Name)	
(Ad	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
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17 AUG 17 PH 8: 36 SECRETARY OF STATE PAULAHASSEE FLORID

AUG 17 2017

R. William



August 3, 2017

JULIE HOLLI 2362 HADDON HALL PLACE CLEARWATER, FL 33764

SUBJECT: BEST EDGE LANDSCAPING, INC.

Ref. Number: P16000089009

We have received your document for BEST EDGE LANDSCAPING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Is the above referenced entity the correct entity for the amendment you are filing? If so, please print the name on the line at the top of page 1of 4. If not, please print the name of the entity you are changing the name of as it appears in our records in the space mentioned above.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 817A00015779

Rebekah White Regulatory Specialist II

Articles of A	mendment	FILED
Articles of Inc	orporation .	17 AUG 17 PH 8: 36
Real to dead of	45 440.	SECRETION PH 8: 36
(Name of Corporation as current)	g S C U G V C T	TO DOTE OF STATE
	$\hat{x} \hat{a}$ and $\hat{a}$	THE DEPT. OF STATE
(Document Number of	Corporation (if know	
	·	
ursuant to the provisions of section 607.1006. Florida Statutes, this is Articles of Incorporation:	riorida Projii Corpor	ation adopts the following amendment(s
. If amending name, enter the new name of the corporation:		
Best Edge Builde	rs, Inc.	The new
ame must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " cord "chartcred," "professional association," or the abbreviation "	n," "company," or ' Co". A professional P.A."	incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )	2362 H	reddon Hall Place ter, FL 33764
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2362 Ho Clearwast	iddon Hall Place
. If amending the registered agent and/or registered office address  Name of New Registered Agent		the name of the
(Charles are		
(Florida stre	eer aaaress)	
New Registered Office Address:	(City)	, Florida(Zip Code)
iew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w		ligations of the position.
Signature of New R	evistered Avent, if cha	maina

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.

X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	<u>SV</u> <u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	N/A	
Add	/	
Remove		
2) Change		
Add		· · · · · · · · · · · · · · · · · · ·
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

. If amending or adding additional Arti (Attach additional sheets, if necessary).		(s) here:			
n/a	<del>-</del>				
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				<u>.                                    </u>	
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If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)				ares,	
(3 4), \$					
n/a		-			
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				1. A.	
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:    1   24   17	
(no more than 90 days after amendment file d	ate)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the above the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes cast 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 an action was not required.	d shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.	areholder
Dated 7/24/17	
Signature Att W + 71 l	
(By a director, president or other officer - if directors or officers ha	
selected, by an incorporator – if in the hands of a receiver, trustee, of appointed fiduciary by that fiduciary)	or other court
-Julie Holli	
(Typed or printed name of person signing)	
DVESIDENT	
(Title of person signing)	-