## P17000015014

(Requestor's Name) (Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. PRATHER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 12, 2017

TREE SERVICE GROUP INC C/O RAMONA WALLS 8680 SW 94TH STREET.,UNIT C OCALA, FL 34481 US

SUBJECT: TREE SERVICE GROUP INC

Ref. Number: P17000015014

It has been brought to the attention of this office that TREE SERVICE GROUP INC, is not located at 8680 SW 94TH STREET., UNIT C OCALA, FL 34481, as listed on the records of the Florida Department of State, Division of Corporations.

Therefore, the purpose of this notice is to: 1.) notify the owner of the Corporation of the incorrect data; and 2.) notify the owner that it is a third degree felony to knowingly and willingly falsify or conceal a material fact or make any false, fictitious, or fraudulent statement in any matter within the jurisdiction of the Florida Department of State. Therefore, the information must be corrected on our records by filing the enclosed form and paying the appropriate fee. This filing will prevent any further action by this office. We can change the Principal, Mailing, & officer/director addresses at no charge.

To change your RegisteredAgent and/or Registered Office, please complete and submit the enclosed form along with the application filing fee.

This business entity will be dissolved/revoked on or after February 12, 2018 unless an address change that complies with Florida Statues is sent to my attention at the address below.

Please reply to this letter and provide me with the correct address so that I may correct our records accordingly or contact me by phone at (850) 245-6900.

Sincerely, Kimberly S. Prather Division of Corporations

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	:_ Tree Service	e Group Inc	
DOCUMENT NUMBER:	W1700001376		
The enclosed Articles of Amen	dment and fee are su	ubmitted for filing.	
Please return all correspondence	e concerning this ma	atter to the following:	
		Ramona Walls	
<del>- 11-12</del>		Name of Contact Perso	n
		Tree Service Gro	oup, Inc.
	-	Firm/ Company 8242 SW 78th (	Circlu
		0242 337 7601 9	
		Address Ocala, Florida	34476
		City/ State and Zip Cod	<u></u>
	ramona.w	r.walls@gmail.com	
- ·		0	untification)
E-III	an address; (to be us	sed for future annual report	notification)
For further information concern	ing this matter, pleas	se call:	
Ramona Walls		at (561	735-2369
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made	payable to the Florida Depa	artment of State:
_	3.75 Filing Fee & ertificate 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 Add Amendment S Division of C P.O. Box 632 Tallahassee, F	ection orporations 7	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle essee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Tree Servi	ce Group INC			
(Name of	Corporation as current	ly filed with the Florida Dept. of State	)	
W1700	00013769			
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this	Florida Profit Corporation adopts the	following ameno	iment(s) to
A. If amending name, enter the new nam	e of the corporation:			
			The i	new
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat- word "chartered," "professional association	ion "Corp," "Inc," or '	'Co". A professional corporation nam	r the abbreviat	tion
B.)Enter new principal office address, if	applicable:	8242 SW 78th Circle		
(Principal office address <u>MUST BE A STR</u>		Ocala, Florida 34476	20	_ 17
			14 S	_DEC
			- <u> </u>	
C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8242 SW 78th Circle		_ (O _ ` _ <del>!?*</del>
		Ocala, Florida 34476		71 10
		h, 1	ŕ_	AN 10: 23
D If amounting the projectional areas and	uu uanistavad office addi	voss in Charida, autor the name of the		_
D. If amending the registered agent and/onew registered agent and/or the new r				
Name of New Registered Agent	The strength of the latest All Declaration of All			
	8242 SW 78t			
_	(Florida str	reet address)		
New Projects of Office Address	Ocala,	. Florida	34476	
New Registered Office Address:	·	(City)	(Zip Code)	_
New Registered Agent's Signature, if chall I hereby accept the appointment as registere			vaitin u	
r nereby accept the appointment as registere	a ageni. Tam jamuur i	with and accept the obligations by the pi	stion.	
	Signature of New R	legistered 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)

Example:

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 Doc
X Remove	$\underline{\mathbf{v}}$	Mike Jones
X Add	<u>sv</u>	Sally Smith
Type of Action (Check One)	<u>Title</u>	Name Address
(l)Change		/
Add		
Remove		
(2) Change		
Add		
Remove		
3) Change		<del></del>
Add		
Remove		
4) Change		
Remove		<u> </u>
5) Change		_ ,/
Remove		
6) Change	<del>/</del> -	
Add	/	
Remove	1	

mending or adding additional Art tach additional sheets, if necessary).	(Be specific)		
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n amendment provides for an exch	ange, reclassification, or cr	nncellation of issued shares,	
ovisions for implementing the ame (if not applicable, indicate N/A)			
The number of share count	should change from 1	Share to 100 Shares.	
	<del>-</del>	<u> </u>	
	715-11		

The date of each amendment(s) adoption:	November 13, 2017	if other than the
date this document was signed.		
Effective date if applicable:	November 13, 2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of S	ot meet the applicable statutory filing requirements, this date state's records.	e will not be listed as the
Adoption of Amendment(s)	ECK ONE)	
☐ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendment(s) oproval.	
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	it
"The number of votes cast for the amend	lment(s) was/were sufficient for approval	
by		
(voti)	ng group)	B4
The amendment(s) was/were adopted by the b action was not required.	oard of directors without shareholder action and shareholder	7 DEC 20
The amendment(s) was/were adopted by the ir action was not required.	accorporators without shareholder action and shareholder	0 4
Dated 12-13/11		AH 10: 2:
Signature_		$eta = eta \cdot oldsymbol{\widetilde{\omega}}$
	ent or other officer - if directors or officers have not been	
	porator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary t		
,	RAMORA WALLS	
<u></u>	yped or printed name of person signing)	
	$\supset$	
	(Title of person signing)	