## P17000027041

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations						
NAME OF CORPORATION: Plus Pest Control						
DOCUMENT NUMBER: P170000 270 41						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Name of Contact Person  Plus pest Control  Firm/ Company  2623, SW, 127, AVE  Address  Miami FL 33175  City/ State and Zip Code  Yamon is illar @ bell South - Net  E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Ramon Villav at 305 484-5181  Name of Contact Person Area Code & Daytime Telephone Number						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
S35 Filing Fee  Certificate of Status  (Additional copy is enclosed)  Certificate Of Status  Certified Copy  (Additional Copy is enclosed)						
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303						

## Articles of Amendment

to
Articles of Incorporation

Plus Pest Co.	utrol INC
	filed with the Florida Dept. of State)
P170000 270	
	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "luc.," or Co.," or the designation "Corp," "luc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2024 NC
D. If amending the registered agent and/or registered office addre	per in Florida, enter the name of the
new registered agent and/or the new registered office address:	SS IN PROPRIES OF THE COLUMN SERVICE OF THE
Name of New Registered Agent	<u> </u>
(Florida stree	et address)
New Registered Office Address:	, Florida
(1)	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT John	Doc	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	92	Daniel Villar	3023 SW, 127 AVE
_ <b>X</b> _ Add			Miaml FL 33175
Remove			
2) Change			
Add			<del></del>
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	cles, enter change(s) here: (Be specific)
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s) adoption:	oct-zy	Y505-	, if other than the
Effective date if applicable:			
	(no more than 90 days after	amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of S	t meet the applicable statutor State's records.	y filing requirements, this date wi	ill not be listed as the
Adoption of Amendment(s) ( <u>CHE</u>	ECK ONE)		
☐ The amendment(s) was/were adopted by the in action was not required.	ncorporators, or board of dire	ctors without shareholder action an	id shareholder
The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of opproval.	votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the must be separately provided for each voting g			
"The number of votes cast for the amend	Iment(s) was/were sufficient	for approval	
by Z			
(votin	ig group)		
Dated Oct	25-202 más Villa	-4 president of	plus pest Cont.
(By a director, presid	ent or other officer – if direct	ors or officers have not been	<del></del>
selected, by an incon appointed fiduciary t	•	receiver, trustee, or other court	
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	'yped or printed name of pers	on signing)	
	President		
	itle of person signing)		<del>_</del>