P170000010819

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Austin's Curb App	eal, Inc.		
DOCUMENT NUMB	P17000070819			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
_		Mark Aust	in Jr.	
_	Name of Contact Person Austin's Curb Appeal In.			
-	12335 1-	Firm/Company	ch.	
-	Jac	Address (SUVVILLE TO 3 City/ State and Zip Cod	1114	
	e. Qustin \$\psi\$ E-mail address: (to be us			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Mark	Austin Tr.		, 885-3490	
Name 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		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Austin's Curb Appeal, Inc.		
· · · · · · · · · · · · · · · · · · ·	on as currently filed with the Florida Dept. of State)	
P17000070819		
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new name of the cor	rporation:	
	·	_The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the a	I "corporation," "company," or "incorporated" or the a ""Inc," or "Co". A professional corporation name must abbreviation "P.A."	bbreviation contain the
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDI</u>	RESS)	
	<u>~~~</u>	19
	——————————————————————————————————————	
C. Enter new mailing address, if applicable:	men Mis	≥ TI
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	ý <u>"" " " " " " " " " " " " " " " " " " </u>	
	<u> </u>	≥ □
		ë O
		-
D. If amending the registered agent and/or registere		12
new registered agent and/or the new registered o	office address:	
Name of New Registered Agent		_
	(Florida street address)	_
New Registered Office Address:	. Florida	
New Meginter ett Vyrice , Marcus		Code)
New Registered Agent's Signature, if changing Regis	stered Agent: I am familiar with and accept the obligations of the position.	
r nevery accept the appointment as regimered agent.	am familian with and accept the obligations of the position.	
		_
Signa	sture 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Michael Austin	11542 Monument Ridge Dr
Add Remove			Jacksonville, FL 32225
2) Change Add			
Remove 3)ChangeAdd			78 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
Remove 4) Change			HESSE FLOR
Add			2000 E
5) Change Add			
Remove			
6) Change			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
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f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	· /
(if not applicable, indicate N/A)	
	S: L
	- N
	- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

The date of each amendment(s) adoption:	i	other	than the
date this document was signed.			
Effective date if applicable:			
Effective date if applicable: (no more than 90 days after amendment file date)			
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	vill not l	be liste	ed as the
Adoption of Amendment(s) (CHECK ONE)			
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.			
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):			
"The number of votes cast for the amendment(s) was/were sufficient for approval			
by			
(voting group)			
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.			
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	≨s		
June 18, 2019 Dated		2 NNF 61	77
Signature Mak aw	1555 1475 1475 1475	121	-
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	C. FLORIDA	AM 8: 42	ILED
Mark Austin, Jr.	Dr:	\$	
(Typed or printed name of person signing)			
President			
(Title of person signing)			