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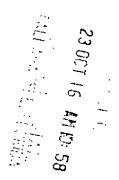
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PICK-UP	MAIT MAIT	MAIL
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Certified Copies	_ Certificates of Status	
Special Instructions to	Filing Officer:	
	J. HORNE	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	PROFESSSION	NAL TREE & LANDSCAF	'E INC		
DOCUMENT NUMBER:	P17000073924				
The enclosed Articles of Amenda	uent and fee are su	ebmitted for filing.			
Please return all correspondence of	oncerning this ma	itter to the following:			
		CAROL WYSOCKI			
	Name of Contact Person				
	WTACS ENTERPRISE INC				
Firm/ Company					
	2101 VISTA PARKWAY STE-239				
	Address				
WEST PALM BEACH, FL 33411					
City/ State and Zip Code					
	CMTAC	@OUTLOOK.COM			
E-mail		sed for future annual report	notification)		
For further information concerning	g this matter, pleas	se call:			
CAROL WY	SOCKI	at (
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for the follow	ing amount made	payable to the Florida Depa	artment of State:		
~	75 Filing Fee & ficate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 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 The Co	Address ment Section in of Corporations entre of Tallahassee V. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

PROFESSIONAL TREE AND LANDSCAPING INC	
(Name of Corporation as currently filed with the Florida Dept. of State)	ر ح,
P017000073924	· 6. 1
(Document Number of Corporation (if known)	. 6
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following Articles of Incorporation:	ng amendment s
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 abbreviati "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conta "chartered," "professional association," or the abbreviation "P.A,"	The new ' ion "Corp.," in the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u>-</u>
	
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:	
Name of New Registered Agent	der.
(Florida street address)	_
New Registered Office Address:, Florida	
(City) (Zip ('ode)
New Registered Agent's Signature, if changing Registered Agent: 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	•
heck if amplicable	

Check if applicable

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	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	P	TERESA LONG	5020 SE FRONT AVE	
Add		-	STUART, FL 34997	
X Remove			5020 SE FRONT AVE	
2) Change	P	BARRY O THOMAS	STUART, FL 34997	
X Add				
Remove Change				
Add		•		
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove			_	
б) Change				
Add		· · · · · · · · · · · · · · · · · · ·		
Remove				

	ets, if necessary). ((Re specific)			
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	<u>rides for an exchang</u>	ge, reclassification, o	or cancellation of i	ssued shares,	
<u>n amendment prov</u>	<u>nenting the amendr</u>	nent if not contained	<u>d in the amendmer</u>	<u>it itself:</u>	
<u>ovisions for impien</u>					
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<u>ovisions for impien</u>	indicate N/A)				

The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date if applicable:	
(no more than	n 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicament's effective date on the Department of State's records	olicable statutory filing requirements, this date will not be listed as the i.
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, action was not required.	or board of directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders must be separately provided for each voting group intitled	
"The number of votes cast for the amendment(s) was/	were sufficient for approval
by	
(voting group)	
10/06/2022 Dated	
Signature / LEROSA S. C	_ONG
(By a director, president or other o	fficer -if directors or officers have not been
selected, by an incorporator – if in appointed fiduciary by that fiducia	the hands of a receiver, trustee, or other court
	RESA LONG
(Typed or printe	ed name of person signing)
PI	RESIDENT
(Title of person	signing)