P17000078818

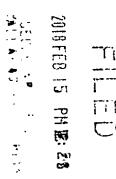
(Re	questor's Name)	
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* ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: A.O.B. Lawn Serv	ices, Inc.	
	BER: P17000078818		
	s of Amendment and fee are st	abmitted for filing.	
Please return all corr	espondence concerning this ma	itter to the following:	
•	Rachael Thorn		
		Name of Contact Perso	n
	A.O.B. Lawn Services, Inc.		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	16150 Boyette Rd.	,	
		Address	
	Riverview, FL 33569		
		City/ State and Zip Cod	Ľ
rael	unthorn[1@gmail.com		
 -		sed for future annual report	notification)
For further informati	on concerning this matter, plear	se call:	
Rachael Thorn		813 at (335-0038
Name	of Contact Person	at (813) 335-0038 Area Code & Daytime Telephone Numbe	
Enclosed is a check (or the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	S43.75 Fifing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.0	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle		lment Section on of Corporations

fallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A.O.B. Lawn Services, Inc.		
(Name of Corporation	as currently filed with the Florida I	Dept. of State)
P17000078818		
(Documen	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida 8 its Articles of Incorporation:	tatutes, this Florida Profit Corporation	m adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:	
N/A		The new
name must be distinguishable and contain the word "Corp." "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab.	"Inc." or "Co". A projessional cor	orporated" or the abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR)	ESS)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
	·	
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 off	<u>ice address;</u>	Po Co
Name of New Registered Agent N/A		
	(Florida street address)	
<u>New Register</u> ed <u>Office</u> Address:		. Florida
Et in Auguster Ca Chine Hauress.	(Cay)	iZip Code,
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent - La		tions of the position
Therety accept the appainment as registered agent. The	m jamaka wan take ta cepi ine oranga	neus aj ine pertuan
Signatu	we of New Registered Agent, if changi	ng

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

E vample: <u>X</u> Change	<u>101.</u>	n Doc	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
<u>X</u> Add	<u>8V</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Titie</u>	<u>Name</u>	<u>Addres</u> s
1) Change	i'	Jenny Nelson	16150 Boyette Rd.
Add			Riverview, FL 33569
X Remove			
2)Change	þ	Rachael Thorn	16150 Boyette Rd.
X Add			Riverview, FL 33569
Remove			
3) Change	N/A		
Add			
Remove			
4) Change	N/A		
Add			<u></u>
Remove			
51 Change	N/A		
Add			
Remove			
6) Change	N/A		
Add			
Remove			

E.' If amending or adding additional Articles, enter cl (Attach additional sheets, if necessary).— (Be specific	<u></u>				
N/A					
					
					
					
			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
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E 16 an amandan and an aid. Can an aid an aid an aid	14"	15 - 2 - 40 2			
 If an amendment provides for an exchange, reclass provisions for implementing the amendment if no 	Sification, or c	the amendment	ued shares, itsalf		
(if not applicable, indicate N A)	it tomainita in	the amendment	itseir.		
N/A					
					
					
					
					

The date of each amendment(s) adoption:
N/A
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 will not be listed as document's effective date on the Department of State's records.
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
evoting group)
■ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) wa, 'were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated $1/1/13$
Signature 2 PMY A U. 2. Oby 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 tiduciary)
(Typed or printed name of person signing)
President
(Title of person signing)