## P17000079321

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	÷ #)
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## COVER LETTER

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TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: TREE S	ungrowy TRE	E Harling INC.		
NAME OF CORPORATION:     REE S  DOCUMENT NUMBER:   P   120000	79221			
The enclosed Articles of Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this ma	tter to the following:			
and the same of th	Name of Contact Person			
IREE SUR gra	Firm/ Company	truling Inc.		
PO. BOX	5500 \$6			
Orlando,	Address	5		
CRiando,	City/ State and Zip Cod	55		
City/ State and Zip Code				
E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, pleas				
MR. Hezekah McCh. Name of Contact Person	1 Area Co			
Enclosed is a check for the following amount made				
□ \$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		Address		
Amendment Section	Amendment Section			
Division of Corporations P.O. Box 6327	on of Corporations			
Tallahassee, FL 32314		Building xecutive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorpo	oration
- 10 of	10 1/1
(Name of Corporation as currently file	
	d with the Fiorida Dept. of State)
P/1000079221	
(Document Number of Con	poration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Ni / A	27
name must be distinguishable and contain the word 'corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", word "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NI/A
D. If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:  Name of New Registered Agent	n Florida, enter the name of the
(Florida street a	ldress)
New Registered Office Address:(City	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a	and accept the obligations of the Position.
Signature of New Regist	ered 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.

X Change	PT John I	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>C00</u>	Ellis BalackSr.	200 Doby De. Oclando, Fl. 32805
Add		·	Oclando, Fl. 32405
Remove			
2) Change Add	CEO	Hezekinh Mc Clink	DRIANDO FI. 32805
			Clando_P1. OdsOJ
Remove 3) Change	CFO	Susun Mc Clinton	10 BOX 53 W66
Add			Octano, Fl. 32805
Remove			7 . 5
4)Change	<u>C00</u>	Susan McChatan	4.0.BUS50066
Add			Octando, M. 32805
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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f an amendment provides fo	r an excha	nge, reclassifi	ication, or car	ncellation of is	sued shares,	
provisions for implementing (if not applicable, indicate	the ameno	dment if not c	ontained in t	<u>he amendmen</u>	t itself:	
(у тл аррисате, така	ie ivini)	11/1	,			
-	<del></del>	N/A	•			
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The date of each amendment(s) adoption:	, 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 meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill not be listed 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.	
Signature  (By a frector, 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)	<del></del>
Hezekiah McCliniton (Typed or printed name of person signing)	
(Title of person signing)	