# P170000 883972

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### **COVER LETTER**

Division of Corporations NAME OF CORPORATION: Farinton Trash Removal inc DOCUMENT NUMBER: P17000 8839 2 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Farinton Francis
Name of Contact Person Firm/ Company Address

Migmi FC 33167

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Facintal Francis at (355) 733-7666

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: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

## **Mailing Address**

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# Articles of Amendment

10

# Articles of Incorporation

Enciator	Track Domais 1 - ac
(Name of C	Corporation as currently filed with the Florida Dept. of State)
	~ X29)
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name	e of the corporation:
	The new
	n the word "corporation," "company," or "incorporated" or the abbreviation for "Corp," "Inc," or "Co". A professional corporation name must contain the n," or the abbreviation "P.A."
B. Enter new principal office address, if a (Principal office address <u>MUST BE A STR</u>	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF	
D. If amending the registered agent and/onew registered agent and/or the new r	or registered office address in Florida, enter the name of the
Name of New Registered Agent	Facinton A. Francis
Name of New Registered Agent	
_	(Florida street address)
N. H. S. LOW All S.	Mismi Florida 33167
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as registere	nging Registered Agent: ed agent. I am familiar with and accept the obligations of the position stars
	Sighadure of New Registered Agent, if changing
	Control of the contro

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	Ā	Mike Jone	<u>es</u>							
X Add	<u>sv</u>	Sally Smi	<u>th</u>							
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s				
1) Change	<u>P</u>		Farinton	A.	Francis		130	NN	13544	Street
Add						M	1 ami	fl ?	53167	
Remove										
2) Change										
Add										
Remove									<del></del>	
3 ) Change							<del></del>			
								_		
Remove										
4) Change										
Add						<del></del>	-	<del></del>		
Remove										
5)Change					<del></del>			_		
Add								<u> </u>		
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6)Change										
Add										
Remove										

ttach <i>additional s</i>	ding additional Articles, if necessary).	(Be specific)				
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an amendment	provides for an exch	ange, reclassific	ation, or cance	llation of issued	I shares.	
<u>provisions for im</u> Of not applied	plementing the ame able, indicate N/A)	<u>ndmeat if not co</u>	ntained in the	<u>amendment itse</u>	<u>·lf:</u>	
(9) 11/1 11/9/11(						
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The date of each amendment(s) adoption: 11/34/17 date this document was signed.	, if other than th
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records	will not be listed as th
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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"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.	
Dated	
(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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President (Title of person signing)	
(Title of nerson signing)	