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## COVER LETTER

NAME OF CORPORATION: O'CALLAGAHN LAWN SERVICES, INC. DOCUMENT NUMBER: P19000018802 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DOLLA DAVY Name of Contact Person DAVY & ASSOCIATES ACCOUNTING AND TAX, INC. Firm/ Company 5321 1ST AVE S Address ST PETERSBURG, FL 33707 City/ State and Zip Code DOLI@DAVYSACCOUNTING.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 727 ) 520-1980

Area Code & Daytime Telephone Number DOLLA DAVY Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

S35 Filing Fee

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327

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Amendment Section Division of Corporations Clifton Building

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Certified Copy (Additional Copy

is enclosed)

Certificate of Status

## Articles of Amendment to Articles of Incorporation of

O'CALLAGAHN LAWN SERVICES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P19000018802 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: O'CALLAGHAN LAWN SERVICES, INC. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) 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 (Florida street address) New Registered Office Address: (Zin Code) (City) New Registered Agent's Signature, if changing Registered Agent: I 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

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:

(Anach 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> Jo	ohn Doe	
N Remove	<u>∨</u> <u>N</u>	t <u>ike Jones</u>	
X Add	<u>sv</u> <u>s</u> :	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
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The date of each amendment(s) date this document was signed.	idoption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	
	(no more than 90 days after amendment file	(date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing require epartment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for thufficient for approval.	se amendment(s)
☐ The amendment(s) was/were ap must be separately provided for	oproved by the shareholders through voting groups. The for ir each voting group entitled to vote separately on the amer	llowing statement idment(s):
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and	shareholder
03/14/20	Ŋ	
DatedSignature	J. OCelly h so	
selec	director, president deother officer – if directors or officers ed, by an incorporator – if in the hands of a receiver, trustented fiduciary by that fiduciary)	
	FREDERICK O'CALLAGHAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	