P19 00000 87910

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

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TO: Amendment Section

Division of Corporations

NAME OF CORPORT	0100000		erprises Inc.
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Amerishield 3256 W. Deerfield	Name of Contact Perso Enter prises Firm/ Company Hillsboro Blv. Address Beach II City/ State and Zip Code and for future annual report	Inc (DA) Pest Depot.com)
For further informatio	n concerning this matter, pleas	se call:	
Emear Name	Murray of Contact Person	at (<u>954</u> Area Co	be & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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)
Ame Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation

of	_	
	rises Inc.	
(Name of Corporation as currently)	filed with the Florida Dept. of State	1
P19000087910		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatitis</i> Articles of Incorporation:	orida Profit Corporation adopts the fo	ollowing amendment(s) t
A. If amending name, enter the new name of the corporation:		
N	lA-	The new
name must be distinguishable and contain the word "corporation," "cor" Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A prehartered," "professional association," or the abbreviation "P.A."		reviation "Corp."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	U/A	
		202
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	<u></u>
Withing address MAT BE A POST OFFICE BOX		<u> </u>
		<u> </u>
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the	<u>o</u> .
new registered agent and/or the new registered office address:		
Name of New Registered Agent Eimear M.	urray	
3256 W) H	illsbore Blu	
(Florida street	address)	 -
New Registered Office Address: Merfield Dec	uh Florida	33442
(C	ity)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the po.	sition.
Limenas	Musta	
Signature of New Reg.	istered Jeent, if changing	
Check if applicable The amendment(s) is/are being tiled pursuant to s. 607.0120 (11) (e)		

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 Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P Rosa R. Vyarte	3256 W Milkborn Blif
Add		Dearfield Bruch FZ 3344 d
X Remove	Λ	16 c 21 A
2) Change	P Eugene Agortonar	3256 W Hillsborn Bld
Add		Dearfield Beach FI 33442
Remove 3) Change	fegistered Rosa R Utyante	3256 W 411/5 more Blud
/Add	-Aynt -	- Bortiete Deut 12 33947
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

l <mark>f amending or adding additior</mark> Attach <i>additional sheets, if nece</i> s	ssary). (Be spe	ecific)	-		
		NA			
		- Рүт	<u>-</u>		
				 	
					
					
	- 				
					
	_				
f an amendment provides for a provisions for implementing t	<u>an exchange, rec</u> he amendment i	classification, or finet contained it	cancellation of is	ssued shares,	
(if not applicable, indicate i	V/.4)				
		NIA			
		- '\'\// -			
				 	
		<u></u>			
					. <u></u>

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The date of each amendment(s) adoption: 7/24/20, if other than the date this document was signed.
Effective date if applicable: 7/27/20 (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 the 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 incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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)
Dated
Signature (By a director, prefident or other efficer – 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)
(Title of person signing) President