P3300044727

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COVERLETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DONKEY TREE:	SERVICE INC		
DOCUMENT NUMB	ER: P23000044727			
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	HELEN RODRIGUEZ			
-		Name of Contact Perso	n	
	TAXSMART ACCOUNTING SERVICES			
-	<u> </u>	Firm/ Company		
	9957 MOORINGS DR UNI	Т 502		
-		Address		
	JACKSONVILLE FL 32257			
-		City/ State and Zip Coo	le	
	INFO@TAXSMARTCORE	P.NET		
-	·•·	sed for future annual repor	t notification)	
For further information	concerning this matter, please		733-0027	
Name of Contact Person		Area Co) 733-0027 ode & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Dep	partment of State:	
S35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amen Divisi The C	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

program of any for

Articles of Amendment to Articles of Incorporation of

DONKEY TREE SERVICE INC.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
P23000044727			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amen	ndment(s)	
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Co A professional corporation name must contain the	new orp.," word	
B. Enter new principal office address, if applicable:	6539 Powers Ave Suite 3		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Jacksonville Fl 32217		
		_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6539 Powers Ave Suite 3		
(Mulling dudiess MAT DE AT OST WITTEE BOA	Jacksonville Fl 32217	- 7:	
D. If amending the registered agent and/or registered office ad-		_ 	
new registered agent and/or the new registered office address	ss:	મુછ	
Name of New Registered Agent	:	. පා	
(Florida s	reet address)		
New Registered Office Address:	. Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	it: with and accept the obligations of the position.		
Signature of New	Registered Agent, if changing		
Check if applicable			

☐ The amendment(s) is are being tiled pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name		Address	
1) Change				 	
Add					
Remove					,
2) Change		<u> </u>		 	11.12 Line
Add					=!
Remove Change		.			
Add					1110. 40
Remove				· -	C
4) Change		_		 7	
Add					
Remove					
51 Change				 	
Add					
Remove					
6) Change				 	
Add					
Remove					

Attach additional sheets, if necessary). (Be specific)	
· · · · · · · · · · · · · · · · · · ·	
	
——————————————————————————————————————	
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	<u> </u>
(if not applicable, indicate N/A)	•
	•
	

	11/07/2023	
The date of each amendment(s) late this document was signed.	adoption:	, if other than the
_	. 07/2023	
	(no more than 90 days after amendment f	ile date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requestrates of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were as action was not required.	dopted by the incorporators, or board of directors withou	shareholder action and shareholder
The amendment(s) was were at by the shareholders was/were	dopted by the shareholders. The number of votes east for sufficient for approval.	the amendment(s)
	oproved by the shareholders through voting groups. The reach voting group entitled to vote separately on the an	
"The number of votes ca-	n for the amendment(s) was/were sufficient for approval	
by		•
	(voting group)	
Dated	-07-2023	7 · 2 · 2 · 2 · 2 · 2 · 2 · 2 · 2 · 2 ·
Signature	*	
(By a select	director, president or other officer – if directors or office ed, by an incorporator – if in the hands of a receiver, trus nted fiduciary by that fiduciary)	
	MISAEL LOPEZ RAMOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	