P9200001323

(Rec	questor's Name)			
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06/18/14--01006--007 **35.00

SCORETARY OF STATE OF CORPORATIONS

C. LEWIS

JUL 3 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

	Profession Profession P920000013		ucts, Inc.		
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
í	Patric Alderma	n			
_		Name of Contact Person	1		
_	Firm/ Company				
_	1515 Detrick A	ve			
,	Dalamat Et 005	Address			
<u>l</u>	Deland, FL 327				
		City/ State and Zip Cod	e		
pati	ric@deadfleas.				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	e call:			
Patric Alder	man	_{at} 386	873-4381		
Name of	Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:		
■ \$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 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 **Articles of Incorporation**



Professional Pest Products, Inc.

14 JUN 18 PM 1:50

(Name of Corporation as currently filed with the Florida Dept. of State)

P9200001323

(Document Number of Corporation (if known)

nent(s) to

A. If amending name, enter the new name of the corpermium Pet Products, Inc.	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the all	"Inc," or "Co". A professional corporation name
B. Enter new principal office address, if applicable:	1515 Detrick Ave
(Principal office address <u>MUST BE A STREET ADDR</u>	Deland, FL 32724
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1515 Detrick Ave
(Mutting uturess MAT BE A LOST OFFICE BOX	Deland, FL 32724
D. If amending the registered agent and/or registere	d office address in Florida, enter the name of the
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of New Registered Agent	
new registered agent and/or the new registered of	
new registered agent and/or the new registered of	ffice address:

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		<u>·</u>	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			-

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
<u> </u>	
·····	
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment	(s) adaption: 06/01/2	2014 <u> </u> §	PALEU EURETARY OF	STATE PORATIONS	, if other than the
date this document was signed.	(з) ацорион	 :) V 	Sigh hr chu r	UNATIONS	, if other than the
Effective date <u>if applicable</u> :	06/01/2014	14	JUN 18 P	M 1:50	
	(no	more than 90 day	s after amendn	ient file date)	
Adoption of Amendment(s)	(<u>CHECK</u>	ONE)			
The amendment(s) was/wer by the shareholders was/we	e adopted by the sharehere sufficient for approv	olders. The numal.	ber of votes ca	st for the amendment(s)	
The amendment(s) was/wer must be separately provide					
"The number of votes	cast for the amendmen	t(s) wa <u>s/w</u> ere suf	ficient fo <u>r appr</u> e	o <u>v</u> al	·
by	(voting gr			.,, 	
	(voting gr	oup)			
The amendment(s) was/wer action was not required.	e adopted by the board	of directors with	out shareholder	action and shareholder	
The amendment(s) was/wer action was not required.	e adopted by the incorp	orators without s	hareholder actio	on and shareholder	
Dated_06/0	1/2014				
Signature	War &				
	y a director, president o				
	lected, by an incorporation in the pointed fiduciary by the control of the contro		ds of a receiver	, trustee, or other court	
սի	pointed fiduciary by th	at fiducialy)			
	Wayne Godw	in			
		(Typed or printe	name of perso	on signing)	_ _
	Owner				
		(Title of	person signing)	