## P94000004570

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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(127) 12-3-14

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Leeco Pes IBER: P9400000457			-	
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		_	
Please return all corr	respondence concerning this ma	itter to the following:			
	Michael L Broda				
		Name of Contact Person	n		
Leeco Pest Control Inc					
		Firm/ Company			
	P O Box 943				
		Address		3 55	
Lady Lake FL 32158				14 EGF 2	
City/ State and Zip Code				- 13 - No	
lee	ecopestcontrol@ad	ol.com			,,
		sed for future annual report	notification)	-	
		•			ထ္
For further informati	on concerning this matter, pleas	se call:		े (गी	28
Michael L B	roda	at (352	, 753-2086		
Name	e of Contact Person	Area Co	de & Daytime Telephone Ni	ımber	
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fiting Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>M</u> :	ailing Address	<u>Street</u>	Address		
	nendment Section	Amendment Section			
Division of Corporations  Division of Corporations					
	D. Box 6327 Hahassee, FL 32314		Building Executive Center Circle		
1.41	nanassee, 115 34314	2001 E	Accuracy Center Chele		

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

Leeco Pest Control Inc	01	
(Name of Corporation as currently filed	with the Florida Dept. of State)	
P94000004570		
(Document Number of Co	rporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following a	ımendment(s)
A. If amending name, enter the new name of the corpo		er.
name must be distinguishable and contain the word ' "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abl	corporation," "company," or "incorporated" or the abb Inc," or "Co". A professional corporation name must co	he new reviation ntain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi	office address in Florida, enter the name of the ce address:	20 mg
Name of New Registered Agent Michael L	. Broda	
N/A		
	(Florida street address)	
New Registered Office Address:	(City) , Florida (Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I at		

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:

(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> <u>Jol</u>	nn Doe	AL WORLD
X Remove	<u>V</u> <u>Mi</u>	ke Jones	N
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address 9
ران ( Change	CEO	Michael L Broda	10316 SE Sunset Harbor R
Add			Summerfield
Remove			FL 34491
2) Change	P	Keith A Craveiro	12925 SE 117 Court
Add			Ocklawaha
Remove			FL 32179
3) Change	<u>V</u>	Leon G Broda	10316 SE Sunset Harbor R
Add			Summerfield
Remove			FL 34491
4) Change	AVP	Anthony L Mims	11540 SE 129 Place
✓ Add			Ocklawaha
Remove			FL 32179
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here:	经集	
Attach additional sheets, if necessary) (Be specific)	•	(2) Feb.
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)		
		-
		_
		-
		-
		_
		_

The date of each amendment(s) adoption:date this document was signed.	, if	other than the
· ·		
Effective date if applicable: (no more than 90 c	days after amendment file date)	
(no more man >0 e	adys after amerianem file dute)	
Adoption of Amendment(s) (CHECK ONE)	No.	
The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to the proper entitled t		
"The number of votes cast for the amendment(s) was/were s	21.1	(2) (2)
by(voting group)		
The amendment(s) was/were adopted by the board of directors wi action was not required.  The amendment(s) was/were adopted by the incorporators withou action was not required.		
Signature  (By a director, president or other officer selected, by an incorporator – if in the happointed fiduciary by that fiduciary)	r – if directors or officers have not been mands of a receiver, trustee, or other court	
Chief Execu	nted name of person signing)  Hive Officer  of person signing)	
(Title	or person vi6imi6/	