P45000014686

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SECRUTARY OF STATE TALE ABASSIC FLORIDA

AUG 0 1 2016

C. CARROTHL. S

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: P & S TREES SER	VICE-LANDSCAPING IN	NC
DOCUMENT NUMB	P95000014686		
The enclosed Articles of	of Amendment and fee are sul	bmitted for filing.	
Please return all corresp	condence concerning this mat	ter to the following:	
	APRIL CONDRON		
-		Name of Contact Person	
1	CAPE COD MGMT SVC IN	С	
-		Firm/ Company	
	314 NE 27TH ST		
-		Address	
	WILTON MANORS FL 33	334-2020	
-		City/ State and Zip Code	
APRI	LPEACH1@AOL.COM		
	-	ed for future annual report	notification)
For further information APRIL CONDRON	concerning this matter, pleas	e call: at (at (630-8300
N _u me o	f Contact Person	Area Co	de & Daytime Telephone Number
	the following amount made		•
\$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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

P & S TREE SERVICE-LANDSCAPING INC

(Name of Corporati	ion as currently filed with the Florida Dept. of State)
P95000014686	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	Drporation:
"Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) D. If amending the registered agent and/or register	red 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:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	tistered Agent: I am familiar with and accept the obligations of the position.
Sign	ature 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 <math>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>	<u>Name</u>	<u>Addres</u> s
1) Change	P	SONIA KNIGHT	8540 NW 53RD CT
Add			LAUDERHILL FL 33351
X Remove			
2) X Change	P	PATRICK KNIGHT	8540 NW 53RD CT
Add			LAUDERHILL FL 33351
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add		· · · · · · · · · · · · · · · · · · ·	
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
SHARES ISSUED TO SONIA KNIGHT A	ARE TRANSFERRED TO PATRICK KNIGHT

·	JULY 19, 2016	if other than the
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	ock does not meet the applicable statutory filing requirements, this doartment of State's records.	late will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment ficient for approval.	(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following staten each voting group entitled to vote separately on the amendment(s):	nent .
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and sharehold	der
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
7/19/2016 Dated		
selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other content of the fiduciary by that fiduciary) PATRICK KNIGHT	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	