# P95000081917

(Re	equestor's Name)	_
(Ad	dress)	,
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
, (Bu	siness Entity Nan	ne)
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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	PORATION: GRASSMASTER LAWN SERVICE, INC.			
DOCUMENT NUM	UMBER: P95000081917			
The enclosed Article	es of Amendment and fee	are submitted for filing.		
Please return all corr	respondence concerning the	his matter to the following:		
· ——		RACHEL RUBIN		
		Name of Contact Person		
	GRASSMA	STER LAWN SERVICE, INC.	•	
		Firm/ Company		
	P.O. BOX 50051			
	Address			
	SA	ARASOTA, FL 34232		
<u></u>		City/ State and Zip Code		
	grassmaste E-mail address: (to be us	erlawnservice@live.com sed for future annual report notification)		
For further informati	on concerning this matter	r, please call:		
	CHEL RUBIN	at ( 941 ) 53  Area Code & Daytime Tele	39-3929	
Name of	f Contact Person	Area Code & Daytime Tele	ephone Number	
Enclosed is a check t	for the following amount	made payable to the Florida Depart	ment 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	a.	

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 10, 2010

RACHEL R. RUBIN GRASSMASTER LAWN SERVICE, INC. P.O. BOX 50051 SARASOTA, FL 34232

SUBJECT: GRASSMASTER LAWN SERVICE, INC.

Ref. Number: P95000081917

We have received your document for GRASSMASTER LAWN SERVICE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are not changing the corporate name please list the name in the correct space provided on the amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 110A00003450

SECRETARY OF STATE ALEAHASSEE. FLORID

2010 FEB 26

## **Articles of Amendment** to Articles of Incorporation of

<del>- 7:-112</del>	ER LAWN SERVICE,	NC.
(Name of Corporation as c	urrently filed with the Florida	Dept. of State
P	95000081917	6
(Document	Number of Corporation (if know	Dept. of State)
Pursuant to the provisions of section 607. amendment(s) to its Articles of Incorporation		orida Profit Corporation adopts the foll
A. If amending name, enter the new nam	ne of the corporation:	
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered,"	the designation "Corp," "Inc, professional association," or	" or "Co". A professional corporation
B. Enter new principal office address, if (Principal office address MUST BE A STI		
C. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST Of</u>		
D. If amending the registered agent and/ new registered agent and/or the new i		Florida, enter the name of the
Name of New Registered Agent:	RACHEL RUBIN	
	3004 BALDWIN AVEN	IUE
New Registered Office Address:	(Florida street a	ddress)
	SARASOTA	, Florida_34232
	(City)	(Zip Code)
New Registered Agent's Signature, if cha	inging Registered Agent:	
I hereby accept the appointment as register		nd accept the obligations of the position.
	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) Title <u>Name</u> Address Type of Action Ρ ALAN RUBIN \_\_ 🛮 Add 3004 BALDWIN AVENUE ☑ Remove SARASOTA, FL 34232 RACHEL RUBIN 3004 BALDWIN AVENUE ☑ Add ☐ Remove SARASOTA, FL. 34232 **VP REYNALDO RAMON** 3004 BALDWIN AVENUE ✓ Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. 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 amendmen	t(s) adoption: FEBRUARY 1,2010
Effective date <u>if applicable</u> :	FEBRUARY 1, 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
The amendment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statement ed 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)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
	BRUARY 5, 2010
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	RACHEL RUBIN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)