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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: \_\_\_\_\_ Tree Service Inc DOCUMENT NUMBER: P96000006154 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Richard S Holman Name of Contact Person Sterling Tree Service Inc Firm/ Company 8500 Lillian Hwy Address Pensacola FL 32506 City/ State and Zip Code sterlingtreeserviceinc@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (850 S54-4095

Area Code & Daytime Telephone Number Richard S Holman Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

Sterling Tree Service Inc	
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P96000006154	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
name must be distinguishable and contain the word "cor, "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation "Corp.," . or "Co". A professional corporation name must contain the word iation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)
	<del></del> -
	<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u> </u>
	,
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the obligations of the position.
Signati	ure of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed 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	<u>Addres</u> s
1) Change	D	Richard M Holman	8500 Lillian Hwy
Add			Pensacola FL 32506
x Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		·	
Add			
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6) Change			
Add			<del></del> -
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ich additional sheets, if necessary).	. (Be specific)			
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amendment provides for an exc visions for implementing the am	change, reclassification, or rendment if not contained	r cancellation of issued in the amendment itse	<u>shares,</u> If:	
(if not applicable, indicate N/A)			<u></u>	
<u> </u>				<del></del>
		<del></del>	<del></del>	<del></del>

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	05/01/2024	
The date of each amendment date this document was significant.		, if other than the
Effective date if applicabl	le:	
	(no more than 90 days after amendment file date)	<del></del>
	in this block does not meet the applicable statutory filing requirements, this date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(	(s) ( <u>CHECK ONE</u> )	
■ The amendment(s) was/action was not required.	were adopted by the incorporators, or board of directors without shareholder action	on and shareholder
	were adopted by the shareholders. The number of votes cast for the amendment(s/were sufficient for approval.	s)
	were approved by the shareholders through voting groups. The following stateme vided for each voting group entitled to vote separately on the amendment(s):	ent 1*
"The number of ve	otes cast for the amendment(s) was/were sufficient for approval	•
by		
	(voting group)	
Dated Signature	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)  Richard S Holman	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	