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(Requestor's Name) (Address) (Address)	100333491261
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: _	Kemp	Grading.	and	Landscaping	Inc.
DOCUMENT NUMBER: P				J.	

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The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles Kemp
Name of Contact Person
Kemp Grading and Landscuping, Inc.
Firm/ Company
600 Moonlight court
Address
St. Cloud, Florida 34771 City/State and Zip Code
City/ State and Zip Code
Kenp. Grading O Yahoo, con E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>Charles Kemp</u> Name of Contact Person at (<u>407</u>) <u>908 - 9025</u> Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ S35 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

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

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

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NIA				The	new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp." "Inc." or "Co	". A professional con			
B. <u>Enter new principal office address</u> , if applic (Principal office address <u>MUST BE A STREET</u>)		NIA			
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>	<u>. BOX</u>)	NIA			_
D. If amending the registered agent and/or reg new registered agent and/or the new registe		in Florida, enter the	name of the		_
<u>Name of New Registered Agent</u>	/ <u>A</u>			SEP 20	- Y :
New Registered Office Address:	(Florida street		Florida		ED.
	(C)	(y)	RUN	(Lip Co <u>de</u>)	

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and 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:

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(Attach additional sheets, if necessary)

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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 Fxecutive 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.

<u>N</u> Change	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	PSD	Kemp, Lisa	5201 Moore St.
Add			St. Cloud, FL 34771
X Remove			,, _,, _
2) 🔀 Change	PSDT	Kemp, Charles	600 Moonlight Ct.
Add			St- Cloud, FL 34771
Remove			
3) Change			
Add			19 S
Remove			
4) Change	<u></u>		
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			·
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)			
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<u>If an amendment provides for an exchange, reclassification, or cancellation of issued shares,</u> provisions for implementing the amendment if not contained in the amendment itself:			
(if not applicable, indicate N/A)		9: I 43	
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and the second	08/19/2019	
The date of each amended date this document was signal.	ment(s) adoption:	, if other than t
	08/19/2019	
Effective date <u>if applical</u>	hle:	
Note: If the date inserted document's effective date	ed in this block does not meet the applicable statutory fifting requirements, this dat e on the Department of State's records.	e will not be listed as t
Adoption of Amendmen	u(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) wa by the shareholders w	is/were adopted by the shareholders. The number of votes cast for the amendment(s ras/were sufficient for approval.)
The amendment(s) wa must be separately pre-	is/were approved by the shareholders through voting groups. The following stateme rovided for each voting group entitled to vote separately on the amendment(s):	nı
"The number of	votes east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) wa action was not require	as/were adopted by the board of directors without shareholder action and shareholde ed.	r
The amendment(s) wa action was not require	as/were adopted by the incorporators without shareholder action and shareholder ed.	
(Dated_	08/19/2019 7-19-19	
Signati	ure Quartie E/Cop	1×0.
	(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 court appointed fiduciary by that fiduciary)	SEP 20
	Charles D Kemp	
	(Typed or printed name of person signing)	
	PSDT	9:43 9:43

(Title of person signing)