

PO9000069425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

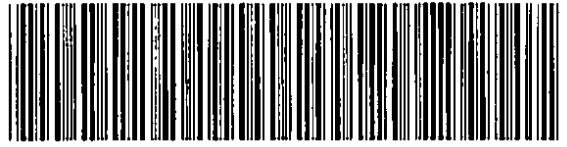
(Business Entity Name)

(Document Number)

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2020 MAR 23 PM 3:11

STATEMENT OF STATE
COMMISSION OF CORPORATION
TALLAHASSEE, FLORIDA

MAR 23 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 10, 2020

EDDIE C MCFARLAND
JUCONN PROPERTIES, INC
5816 SET-N-SUN PLACE
JUPITER, FL 33458

SUBJECT: JUCONN PROPERTIES, INC.
Ref. Number: P09000069425

We have received your document for JUCONN PROPERTIES, 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):

You failed to make the correction(s) requested in our previous letter.

We are enclosing the proper form(s) with instructions for your convenience.

CANNOT USE PROFIT BENEFIT 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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 120A00003971

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JULONN PROPERTIES INCORPORATED

DOCUMENT NUMBER: PO9000069425

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

Please return all correspondence concerning this matter to the following:

Eddie C. McFarland
Name of Contact Person

JULONN PROPERTIES INCORPORATED
Firm/ Company

5816 SET-N-SUN PLACE
Address

JUPITER, FL 33458
City/ State and Zip Code

JUPITERSETNSUN@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eddie C. McFarland at (561) 744-0701
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

JULCONN PROPERTIES INCORPORATED

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

PO9000069425

(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:

N/A

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

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 office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32309

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New Registered Agent's Signature, if changing Registered Agent:

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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>PATRICK E. McFARLAND</u>	<u>1855 CENTER STREET Lt 30</u> <u>JUPITER, FL 33458</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>MICHAEL K. McFARLAND</u>	<u>1855 CENTER STREET Lt 14</u> <u>JUPITER, FL 33458</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

THIS PETITION/REQUEST IS TO CHANGE OUR STATUS OF A FOUR MEMBER BOARD OF DIRECTORS TO A TWO MEMBER BOARD OF DIRECTORS. WE ARE A SMALL FAMILY HELD CORPORATION AND HAVE DECIDED TO ELIMINATE THE SINGULAR TITLE OF SECRETARY AND THE SINGULAR TITLE OF TREASURER. THESE TWO POSITIONS WERE ORIGINALLY HELD BY PATRICK E. McFARLAND (TREASURER) AND MICHAEL K. McFARLAND (SECRETARY). THE DUTIES THAT WERE ASSIGNED TO THOSE POSITIONS WILL NOW BE BORNE BY THE VICE PRESIDENT UNDER THE NEW TITLE OF VICE PRESIDENT AND SECRETARY/TREASURER. THE CURRENT POSITION OF PRESIDENT WILL CONTINUE UNDER JUDY C. McFARLAND. QUESTIONS, CONTACT ME, EDDIE C. McFARLAND (561) 744-0701.

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)

N/A

The date of each amendment(s) adoption: JANUARY 1, 2020, if other than the date this document was signed.

Effective date if applicable: JANUARY 1, 2020
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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 BOARD OF DIRECTORS (SHAREHOLDERS)
(voting group)

Dated 1-20-2020

Signature Eddie C. McFarland

(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)

Eddie C. McFarland
(Typed or printed name of person signing)

VICE PRESIDENT
(Title of person signing)