P17000101848

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TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Property Control	Solutions, Inc			
DOCUMENT NUM	BER: P17000101848				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Valerie E Califar III				
		Name of Contact Person	1		
	Property Control Solutions, Inc				
		Firm/ Company			
	PO Box 2749				
	Address				
	Apopka, FL 32704				
		City/ State and Zip Cod	e		
	property_control@yahoo.co	om			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, plea	se call:			
Valerie E Califar III		at (321) 689-6401		
Name of Contact Person		· · · · · · · · · · · · · · · · · · ·	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:		
X \$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

(Name of	Corporation as current	ly filed with the Florida Dept. of State)
P17000101848		
· · · · · · · · · · · · · · · · · · ·	(Document Number of	of Corporation (if known)
ursuant to the provisions of section 607.1 s Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the following amendmen
If amending name, enter the new na	me of the corporation:	
		The new
ame must be distinguishable and contain t lnc.," or Co.," or the designation "Co chartered," "professional association,"	orp," "Inc," or "Co".	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
3. Enter new principal office address, if applicable:		490 Forest Lake Dr
Principal office address MUST BE A ST	REET ADDRESS)	Altamonte Springs, FL 32714
. Enter new mailing address, if applic (Mailing address MAY BE A POST O		PO Box 2749
	 	Apopka, FL 32704
If amending the registered agent and new registered agent and/or the new		
Name of New Registered Agent	Valerie E Califar III	
· · · · · · · · · · · · · · · · · · ·	490 Forest Lake Dr	
	Alarida et	reet address)
-	77 1177 11417 311	
New Registered Office Address:	Altamonte Springs	, Florida

Signature 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)

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> <u>John</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Richard Workman	2657 Fair Oaks Drive
Add			Deltona, Fl. 32738
X Remove			
2) Change	P	Valerie E Califar III	PO Box 2749
$\frac{X}{}$ Add			Apopka, FL 32704
Remove 3) Change	S	Richard Workman	2657 Fair Oaks Drive
X Add			Deltona, FL 32738
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

<u>f amending or addi</u> Attach <i>additional she</i>	ets, if necessary).	(Be specific)	-10,			
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f an amendment pr	avidee for an aval	hanga madassifi	nation or consol	llation of icenad	churoc	
provisions for impl	ementing the amo	endment if not co	ontained in the	amendment itse	if:	
(if not applicabl	e, indicate N/A)					
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199 ha 6 t	s) adoption: September 30, 2020	, if other than the
date this document was signed.	s) adoption:	, it other than the
Effective date if applicable:	September 30, 2020	
<u></u>	(no more than 90 days after	amendment file date)
	is block does not meet the applicable statuto e Department of State's records.	ry filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of dire	ectors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of re sufficient for approval.	votes cast for the amendment(s)
	approved by the shareholders through voting for each voting group entitled to vote separa	
"The number of votes	east for the amendment(s) was/were sufficient	for approval
by	(voting group)	
Dated	717120 Ruly Wa	
Signature	Liver War	<u> </u>
sel	a director, president or other officer – if directed, by an incorporator – if in the hands of a sointed fiduciary by that fiduciary)	
	Richard Worknau (Typed or printed name of per	· · · · · · · · · · · · · · · · · · ·
	(Typed or printed name of per	son signing)
	President	
	(Title of person signing)	