312802

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(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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(Document Number)			
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CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

WILLIAM H. GILMORE, INC.		
	_	
Please Debit FCA000000003 For: 3	5	
Thank you Seth Neeley	_	
Atta/		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
	1	Fictitious Name File
		Trade/Service Mark
	<u> </u>	Merger File
		Art, of Amend, File
	_	RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Сеп. Сору
		Photo Copy
		Certificate of Good Standing.
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
12		Officer Search
	ļ 	Fictitious Search
Signature		Fictitious Owner Search
	_	Vehicle Search
		Driving Record
Requested by:	-	UCC 1 or 3 File
Name Date	Time	UCC 11 Search
	-	UCC 11 Retrieval
Walk-In Will Pick Up	· — — —	Courier

Articles of Amendment to Articles of Incorporation of

- 1025 KIN 20

WILLIAM H. GILMORE, INC.		
(Name of Corporation	on as currently filed with the Flo	rida Dept. of State)
312802		
(Docum	nent Number of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corp.	oration adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp." "Inc. "chartered," "professional association," or the abbre	" or "Co". A professional corp	rporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	DRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
D. If amending the registered agent and/or registe new registered agent and/or the new registered		er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(City)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent: - Lam familiar with and accept the	obligations of the position.
Ci	nature of New Registered Agent, if a	h maina
Sign	ина с од гусм-коугметса муст, ц с	nanyang
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>Jo</u>	<u>hn Doe</u>	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PΓι	CHAD HAGGERT	10930 EARHART DRIVE
Add			NEW PORT RICHEY, FL. 34654
Remove			40 E - 10 E
2) X Change	VD	ROSEANN HAGGERT	10930 EARHART DRIVE
Add			NEW PORT RICHEY, FL 34654
3) X Change	SD	TRACIE HAGGERT	10930 EARHART DRIVE
Add			NEW PORT RICHEY, FL. 34654
	TD	CASSANDRA HAGGERT	2115 EUCLID CIRCLE E
4) X Change Add			CLEARWATER, FL 33764
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	ides for an exch	ange, reclassification	on, or cancellation	of issued shares.	
f an amendment pros	nenting the amei	adment if not conta	ined in the amendi	ment itself:	
provisions for implen					
f an amendment prov provisions for implen (if not applicable,	marcate N/A)				
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
une uns document was vigneti.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder ac	tion and shareholder
The amendment(s) was/were add by the shareholders was/were si	ipted by the shareholders. The number of votes east for the amendment ifficient for approval.	nt(s)
☐ The amendment(s) was/were approvided for must be separately provided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
Dated O) / Signature	31/25	
selecte	rector president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	n uu t
	CHAD HAGGERT	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	