338929

(Requestor's Name)
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A. BUTLER 0CT 1 2 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	on: Flecht	oilt Inc.		
DOCUMENT NUMBER:	338929			
The enclosed Articles of Am	endment and fee are su	bmitted for filing		
Please return all corresponde	ence concerning this ma	ster to the followi	ពខ្ល:	
	Jo Anr	n Markham		
		Name of Cont	act Person	
	Flecht	oilt Inc.		
		Firm/ Cor	npany	
	8350 N	W 145th	St	
		Addre		
	Reddio	k, Fl 32	686	
		City/ State and	l Zip Code	
	flasha		ا علما ا	
	11ecna mail address: (to be us	sed for future ann		
	`		•	·
For further information conc	erning this matter, plea	se call;		
Jo Ann Mar		at (352) 591-1324 e & Daytime Telephone Number
Name of Con	tact Person		Area Cod	e & Daytime Telephone Number
Finclosed is a check for the fi	ollowing amount made	payable to the Flo	orida Depa	rtinent of State:
[X \$35 Filing Fee	3\$43.75 Filling Fee & Certificate of Status	S43.75 Filin Certified Cop (Additional co- enclosed)	ру	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations		Divisior The Ce 2415 N	Address ment Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to

Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State CT - 7 PH 338929 (Document Number of Corporation (if known) (Document Number of Corporation adopts the following amending Articles of Incorporation: (If amending name, enter the new name of the corporation: (Document Number of Corporation adopts the following amending Articles of Incorporation adopts the following amending Articles of Incorporation: (Document Number of Corporation adopts the following amending Articles of Incorporation adopts the following amending Articles of Incorporation: (Document Number of Corporation (if known) (Document Number of	(Name of Corporation as currently filed with the Florida Dept. of State CT - 7 PH 4: 90 (Document Number of Corporation (if known) (Document Number of C		Articles of the	orporation	1222
(Name of Corporation as currently filed with the Florida Dept. of Safe CT - 7 PH 338929 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following ament its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The mame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corporation," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the will chartered "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Reddick, F1 32686 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 8350 NW 145th. Str	(Name of Corporation as currently filed with the Florida Dept. of Sign CT - 7 PH 4: 00 338929 (Document Number of Corporation (if known) (Document Number of Corporation adopts the following amendment(s) to of Incorporation: (The provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to of Incorporation: (The new he distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp" (Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word ""professional association." or the abbreviation "P.A." (2350 NW 145th Str) (2350 NW 145th Str) (Reddick, F1 32686)		of		
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(Mailing address MAY BE A POST OFFICE BOX)	nding the registered agent and/or registered office address in Florida, enter the name of the registered agent and/or the new registered office address:	Principal office address <u>MUST BE A STREET ADDRESS</u>)		Reddick, Fl 320	686
	gistered agent and/or the new registered office address:	C. Enter new mailing address, if applicabl (Mailing address <u>MAY BE A POST OFF</u>	<u>e:</u> ICE BOX)		
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:		D. If amending the registered agent and/or new registered agent and/or the new reg	registered office add	ress in Florida, enter the name o	of the
Name of New Registered Agent V. Elizabeth Flechas	ame of New Registered Agent Y. Elizabeth Flechas	Name of New Registered Agent	ered Agent Y. Elizabeth Flechas		
19321 NW 160th Ave.	10321 NW 160+h Avo		19321 NW	160th Ave.	
(Florida street address)	Type I'M Tooth Ave.		(Florida str	reet address)	
			Williston		22/2/
Nam Registered Office Address: Williston Florida 32696	(Florida street address) Williston	Now Prairie and Office Address	Williston	ገ	orida 32696
New Registered Office Address: Williston Florida 32696 (City) (Zip Code)	(Florida street address) ew Registered Office Address: Williston	New Registered Office Address:	Williston		orida 32696 (Zip Code)
	IF TAI INN IOUGH AVE.				
1			(Florida str		
			Williston		22/2/
Williston engal 32696	(Florida street address) Williston		Williston	1	ida 32090

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= Treusurer; 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.

E	e, una sanji simini,	or as an man	
Example: X Change	PT John Do	<u>oc</u> '	X
X Remove	V Mike Jo	ones	
<u>X</u> Add	SV Sally Si	mith	
Type of Action (Check One)	Title	Name	Address P.C. Box 8
1) X Change	P	Keith Flechas	Ocklawaha, Fl. 32179
X Add	<u>P</u>	Keith Flechas	P.O. Box 8 Ocklawaha, Fl 32179
Remove 2)X Change	<u>V.</u>	M. Elizabeth Flechas	19321 NW 160th Aye Williston, F1 32696
X Add	<u></u>	M. Elizabeth Flechas	19321 NW 160th Ave Williston, Fl 32696
Remove Change			
Add			
X Remove	2ndV	Alfred J Flechas Jr	420 SW 45th Str Ocala, Fl 34471
4) Change			
X Add	. <u>s/t</u>	Jo Ann Varkham	8350 NW k45th Str. Reddick, F1 32686
Remove			N
5)Change		-1	
Add			
Remove			
6)Change			
Add			
Remove			

	rets, if necessary).	(Be specific)			
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					-
	ovides for an exch	ange, reclassifica	ition, or cancellatio	<u>n of issued shares,</u>	
lf an amendment pr		ndment if not cor	<u>stained in the amen</u>	dment itself:	
provisions for imple	ementing the amer				
If an amendment pr provisions for imple (1) not applicabl	ementing the amer				
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(y not applicabl	ementing the amer				
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provisions for imple (if not applicable	ementing the amer				

The date of each amendment(s)	adoption: 1/01/2022	, if other than the
date this document was signed.	• • •	
Effective date if applicable:	1/01/2022	
emeenve date <u>n appireative</u> .	(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
TXThe amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors wi	thout shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes ca sufficient for approval.	st for the amendment(s)
The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. or each voting group entitled to vote separately on the	The following statement he amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for appr	roval
by Flech	bilt Inc.	·
	(voting group)	•
Dated7	/29/2022	
Signature	a am Markehon	
(By a	director, president or other officer - if directors or o	officers have not been
selec	ted, by an incorporator - if in the hands of a receive	r, trustee, or other court
арро	inted fiduciary by that fiduciary)	,
	Jo Ann Markham	·
	· (Typed or printed name of person sign	ing)
	SecTres.	
·	(Title of person signing)	



August 21, 2022

JO ANN MARKHAM 8350 N W 145TH ST REDDICK, FL 32686

SUBJECT: FLECHBILT INC

Ref. Number: 338929

We have received your document for FLECHBILT INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 622A00018603

RECENTED



June 22, 2022

JO AMM MARKHAM 8350 NW 145TH ST REDDICK, FL 32686

SUBJECT: FLECHBILT INC

Ref. Number: 338929

We have received your document for FLECHBILT INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

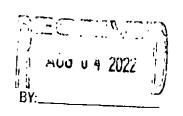
Each Declaration of Trust must be in compliance with chapter 609, Florida Statutes. The Declaration of Trust must be sworn to by the Chairman of the Board as being a true and correct copy and must be notarized.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 222A00014112



June 22, 2022

JO AMM MARKHAM 8350 NW 145TH ST REDDICK, FL 32686

SUBJECT: FLECHBILT INC

Ref. Number: 338929

We have received your document for FLECHBILT INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Each Declaration of Trust must be in compliance with chapter 609, Florida Statutes. The Declaration of Trust must be sworn to by the Chairman of the Board as being a true and correct copy and must be notarized.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 222A00014112

www.sunbiz.org

D. Commerciana D.O. POV 6297 Tollahaggas Florida 3231