

338 929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

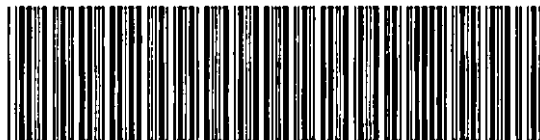
Certificates of Status _____

Special Instructions to Filing Officer:

Reg Agent

Signature

Office Use Only



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2022 OCT -7 PM 4:00
CLERK OF STATE
TREASURY, PA

A. BUTLER

OCT 12 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Flechbilt Inc.

DOCUMENT NUMBER: 338929

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

Please return all correspondence concerning this matter to the following:

Jo Ann Markham
Name of Contact Person

Flechbilt Inc.
Firm/ Company

8350 N W 145th St
Address

Reddick, FL 32686
City/ State and Zip Code

flechaslcenturylink.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jo Ann Markham at (352) 591-1324
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:

<input checked="" type="checkbox"/> \$35 Filing Fee	<input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	<input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
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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

Flechbilt Inc.

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

338929

(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:

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" or "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

8350 NW 145th Str

Reddick, FL 32686

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

8350 NW 145th Str

Reddick, FL 32686

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 Y. Elizabeth Flechas

19321 NW 160th Ave.

(Florida street address)

New Registered Office Address: Williston, Florida 32696
(City) (Zip Code)

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>Keith Flechas</u>	<u>P.O. Box 8</u> <u>Ocklawaha, Fl. 32179</u>
<input type="checkbox"/> Add	<u>P</u>	<u>Keith Flechas</u>	<u>P.O. Box 8</u> <u>Ocklawaha, Fl 32179</u>
<input type="checkbox"/> Remove			
2) <input checked="" type="checkbox"/> Change	<u>V</u>	<u>M. Elizabeth Flechas</u>	<u>19321 NW 160th Ave</u> <u>Williston, Fl 32696</u>
<input checked="" type="checkbox"/> Add	<u>V</u>	<u>M. Elizabeth Flechas</u>	<u>19321 NW 160th Ave</u> <u>Williston, Fl 32696</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove	<u>2ndV</u>	<u>Alfred J Flechas Jr</u>	<u>420 SW 45th Str</u> <u>Ocala, Fl 34471</u>
4) <input type="checkbox"/> Change			
<input checked="" type="checkbox"/> Add	<u>S/T</u>	<u>Jo Ann Varkham</u>	<u>8350 NW 45th Str.</u> <u>Reddick, Fl 32686</u>
<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			

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

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

(The page contains horizontal lines for writing.)

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

[illegible]

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
(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 Flecbilt Inc.
(voting group)"

Dated 7/29/2022

Signature Jo Ann Markham
(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)

Jo Ann Markham

(Typed or printed name of person signing)

Sec. - Tres.

(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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

RECEIVED
OCT 07 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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.

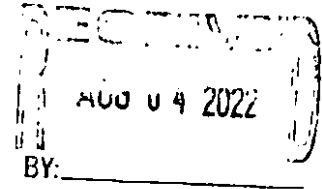
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 222A00014112



FLORIDA DEPARTMENT OF STATE
Division of Corporations



June 22, 2022

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

SUBJECT: FLECHBILT INC
Ref. Number: 338929

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Anissa Butler
Regulatory Specialist II

Letter Number: 222A00014112