356 136

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(Ad	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NORTHSIDE PRO	PANE, INC.			
DOCUMENT NUM	BER: 356136				
	of Amendment and fee are sub	mitted for filing.			
Please return all corre	spondence concerning this matt	er to the following:			
	RONNIE L. HARPER				
		Name of Contact Person	1	-	
	NORTHSIDE PROPANE, INC	C.			
		Firm/ Company		w.	
	17602 N US HWY 41				
		Address		-	
	LUTZ, FL 33549				
		City/ State and Zip Code	<u> </u>	-	
	rhonda@northsidepropane.coi	n			
	E-mail address: (to be use	ed for future annual report	notification)		
For further information	on concerning this matter, please	e call:		[~]	
Ronnie L. Harper		at (949-4286	;; ;;	-
Name	of Contact Person	Area Co	de & Daytime Telephone Numbe	er	
Enclosed is a check for	or the following amount made p	ayable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	19 × 19	

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 Taliahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

NORTHSIDE PROPANE, INC.

(Name o	of Corporation as currently	filed with the Florida De	pt. of State)	
356136				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation	adopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain "chartered," "professional association,"	Jorp," "Inc," or "Co". A			on "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE AS			· ·	<u></u>
				· . ·
C. Enter new mailing address, if appl				
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)			.
D. If amending the registered agent ar	nd/or registered office addr	ess in Florida, enter the n	ame of the	
new registered agent and/or the ne				1- 1 1- 1
Name of New Registered Agent	PAUL F. GRATTON			
Chanking the Minister of Tagette	SAME NO CHANGE TO	THE ADDRESS	_	; 1
	(Florida str	ret address)		- C3
New Registered Office Address:	SAME		, Florida SAME	- · · · · ·
		(City)	(Zip C	inde)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	nanging Registered Agent; tered agent. I am familiar v	with and accept the obligati	ons of the position.	
-	(34		
	H. Os Al	S. Me Vin		

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 Doc 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: X Change	<u>PT 1</u>	ohn Doe	
X Remove	<u>v</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PI)	GRATTON, ROBERT H. RETIRED	4 ANTON CT
Add			HOMOSASSA, FL 34446
X Remove			
2) Change	D	OVITT, DAVID R (DECEASED)	4578 COUNTY RD SUITE 317A
Add			BUSHNELL, FL 33513
X Remove	PVTST R	PAUL F. GRATTON	8528 SWISS CHARD CIR
Add			LAND O LAKES, FL 34637
Remove		DOMNIE I. HADDED	8727 WHITE SAGE WAY
4) X Change	D	RONNIE L. HARPER	
Add			LAND O LAKES, FL 34637
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
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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)	
NCEL 50% OF SHARES FOR ROBERT H. GRATTON	<u> </u>
DD 100% OF SHARES TO PAUL F. GRATTON	
	 ,
	 ,
	*

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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no r	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not meed document's effective date on the Department of State'	et the applicable statutory filing requirements, this date will not be listed as the s records.
Adoption of Amendment(s) (CHECK	ONE)
The amendment(s) was/were adopted by the incorp action was not required.	orators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareh by the shareholders was/were sufficient for approve	holders. The number of votes east for the amendment(s) ral.
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	cholders through voting groups. The following statement of entitled to vote separately on the amendment(s):
"The number of votes east for the amendmen	t(s) was/were sufficient for approval
hy	· · · · · · · · · · · · · · · · · · ·
(voting gro	nip)
Dated	My to
(By a director, president o	or other officer – if directors or officers have not been cor – if in the hands of a receiver, trustee, or other court at fiduciary)
PAUL F. GRATT	ON .
(Typed	or printed name of person signing)
P. VP. S. TR	
(Title c	of person signing)