543611

(Requestor's Name)
(Address)
` ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(During Fig. 1)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600329865686

05/24/19--01900 -026 ++70.00

2019 MAY 24 P @ 20

JUN 19 2019 T. L - TEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DAVE CARTER & A	SSOCIATES, INC		
DOCUMENT NUMBER: 543611			
The enclosed Articles of Amendment and fee are submit	itted for filling.		
Please return all correspondence concerning this matter	to the following:		
DOCK A. BLANCHARD, ESQU	JIRE		
	Name of Contact Person		
BLANCHARD, MERRIAM, AD			
	Firm/ Company		
4 SOUTHEAST BROADWAY	Timb Company		
	Address		
OCALA, FLORIDA 34478			
	City/ State and Zip Code		
DBLANCHARD@BMAKLAW.COM			
E-mail address: (to be used to	for future annual report notification)		
For further information concerning this matter, please ca			
DOCK A. BLANCHARD, ESQUIRE	at (352) 732-7218		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made paya	ble to the Florida Department of State:		
Certificate of Status	\$43.75 Filing Fee & Certified Copy Certified Copy (Additional copy is enclosed) 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED

DAVE CARTER & ASSOCIATES, INC	Ç		אות פוחכ	(24 P 2 2
(Name	of Corporation as currently	filed with the Florida Dep		
543611			· · · · · · · · · · · · · · · · · · ·	n in
	(Document Number of C	Corporation (if known)	A. LAI	THE RES . 1
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Fl	orida Profit Corporation a	dopts the following amendme	ent(s) to
A. If amending name, enter the new n	ame of the corporation:			
N/A			The new	,
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the control of t	nation "Corp," "Inc," or "Co	". A professional corpor	orated" or the abbreviation	!
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				
D. If amending the registered agent an new registered agent and/or the ne			ne of the	
Name of New Registered Agent				
	4 SOUTHEAST BROADWA			
	(Florida street	address)	7.4470	
New Registered Office Address:	OCALA (C	ity)	, Fiorida 34478 (Zip Code)	
New Registered Agent's Signature, if a linear three linear three linear three linear three linear three linear three linear transfer as register linear transfer linear transf		h and accept the obligation	s of the position.	

Signature of New Registered Agent, if changing

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>Joh</u> j	1 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>	Name	<u>Addres</u> s
1) Change	PD	JOHN J. CURRAN	3530 SW 7TH STREET
Add			OCALA, FL 34474
X Remove			
2) Change	V P D	DAVID J. CARTER, III	3530 SW 7TH STREET
X Add			OCALA, FL 34474
Remove			
3)Change	-S/I	LORI K. DeMATIO	3530 SW 7TH STREET
X Add			OCALA, FL 34474
Remove			
4) Change	PD	David J. Carter, Sr.	3530 SW 745 St
X Add			DCala FL 34474
Remove			
5) Change	<u>D</u>	Dock A. Blanchard	4 SE Broadway
_ X _ Add			Ocala F2 34471
Remove			
6) Change		·	
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	1 4
	
F. If an amendment provides for an excha	inge, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	dment if not contained in the amendment itself:
N/A	
	·

The date of each amendment	(s) adontio	APRIL	2019			, if other than the
date this document was signed						
Effective date <u>if applicable</u> :	APRIL	2019				
		(no m	ore than 90 da	nys after amendment file	e date)	
Note: If the date inserted in document's effective date on t				e statutory filing require	ements, this date will	not be listed as the
Adoption of Amendment(s)		(CHECK C	<u>DNE</u>)			
The amendment(s) was/we by the shareholders was/we				inber of votes east for th	e amendment(s)	
☐ The amendment(s) was/wee must be separately provide						
"The number of votes	cast for the	e amendment(s) was/were su	fficient for approval		
by	·	(voting gro	 			
		(voting gro	up)			
☐ The amendment(s) was/we action was not required.	re adopt ed t	by the board o	f directors with	hout shareholder action	and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted t	oy the incorpo	rators without	shareholder action and	shareholder	
St	lected, by a		or ~ if in the ha	- if directors or officers nds of a receiver, trustee		
٦,	77.0					
)and	J. Car	Her, SV.		
		(Typed	or printed nam	e of person signing)		
	_ <u>_</u> £	Y LSid	int!	CEO		
			(Title of pe	erson signing)		