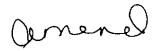
# 553055

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION:	N R. WOOD.	Inc.	
DOCUMENT NUMBE	. ر سر	3055	. <u> </u>	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
		Jane E. M	riller	
		Name of Contact Persor	1	
	John R. Weed Inc.			
_	Firm/ Company			
	9130 CORSCA Del Gentena Way			
_	Address			
_	NAPleS FL 34109 City/ State and Zip Code			
	City/ State and Zip Code			
	Jmi	ICRO John R.	wood, cim	
_	E-mail address; (to be us	TCR @ JOTIM R (	notification)	
For further information	concerning this matter, pleas	se call:		
Jane.	E. M. Hek Contact Person	at (39	, 659-6150	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ng Address		Address	
	idment Section ion of Corporations		Iment Section on of Corporations	
	Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303



RECEIVED

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STATE OF SOME

May 17, 2021

JANE E MILLER 9130 CORSEA DEL FONTANA WAY NAPLES, FL 34109

SUBJECT: JOHN R. WOOD, INC.

Ref. Number: 553055

We have received your document for JOHN R. WOOD, 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):

As of January 1, 2020, the form for amending a Profit Corporation has changed. Please see the attached packet for the proper filing form.

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.

Terri J Schroeder Supervisor

Letter Number: 521A00010303

### **Articles of Amendment** to

## Articles of Incorporation

of

John	R.	Goow	Inc
------	----	------	-----

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

	John R. WOOD Inc	<i>2</i> 2
(Name of Corpora	ation as currently filed with the Florida Dept. of	State)
	553055	State)
(Doc	cument Number of Corporation (if known)	- 4
rsuant to the provisions of section 607,1006, Flor Articles of Incorporation:	rida Statutes, this <i>Florida Profit Corporation</i> adopt	s the following amendmen
If amending name, enter the new name of the	e corporation:	
		The new
ime must be distinguishable and contain the word lnc.," or Co.," or the designation "Corp," "In hartered." "professional association," or the abl	"corporation," "company," or "incorporated" or inc." or "Co". A professional corporation name observation "P.A."	he abbreviation "Corp.,"
Enter new principal office address, if applical principal office address MUST BE A STREET A		
		<del> </del>
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX</u> /	
		***
	stered office address in Florida, enter the name	of the
. If amending the registered agent and/or registered agent and/or the new registered		of the
new registered agent and/or the new register		of the
new registered agent and/or the new register	red office address:	of the
new registered agent and/or the new register	red office address:	of the
new registered agent and/or the new register	ed office address:  (F)orida street address)	orida

Check if applicable

 $\Box$  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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		CYNTHIA LA FORGE MILES	9130 CORSEA DEL FONTANO WAY
X Add			NAPICS FL34109
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<del></del>
Remove			<del></del>
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

наси ввинотаг ме	ng additional Articles, vets, if necessary).— (Bo	e specific)	-		
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f an amendment pr	rovides for an exchang	e. reclassification	, or cancellation o	f issued shares,	
<u>provisions for impl</u>	lementing the amendu	nent if not contain	ned in the amendn	ient itself:	
(if not applicabl	le, indicate N/A)				
			- <del></del>		

The date of each amendment(s) adoption: $\frac{2/23/21}{}$ , if other than the date this document was signed.
Effective date if applicable:
(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"
(voting group)
Signature  (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)
Thillip R. WOOD  (Typed or printed name of person signing)  President Director  (Title of person signing)