574480

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION DOCAL RESTRICTION DOCA
NAME OF CORPORATION: Daniel Roelle onc.
DOCUMENT NUMBER: 574480
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Linda Roettele
Name of Contact Person
Firm/ Company
2178 NW 47 Circle
Orala FL 34482
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Linda Koetleto a1 352, 236535)
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:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

	Articles of Incorporation	FILE
	of	2021 HAD - CD
Daniel roetlelo	Ore.	2021 MAP -8 PM
(Name of Corporate	ion as currently filed with the	Florida Dept. of State)
574480		on Back
(Docur	ment Number of Corporation (if	known)
fursuant to the provisions of section 607.1006, Florid s Articles of Incorporation:	la Statutes, this <i>Florida Profit C</i>	Corporation adopts the following amendment(s
. If amending name, enter the new name of the c	orporation:	
		The new
ame must be distinguishable and contain the word "c 'Inc.," or Co.," or the designation "Corp," "Inc. 'zhartered." "professional association," or the abbro	" or "Co". A professional c	ncorporated" or the abbreviation "Corp.," corporation name must contain the word
. Enter new principal office address, if applicable	e:	•
Principal office address MUST BE A STREET ADD		
		-

. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
	, -	
. If amending the registered agent and/or registe new registered agent and/or the new registered	red office address in Florida, office address:	enter the name of the
Name of New Registered Agent		
	(Florida street address)	
	(1 10) talk bir cer addir (bb)	
New Registered Office Address:	(Ciny)	Florida (Zip Code)
	(ciù)	(Zip Cixie)
ew Registered Agent's Signature, if changing Reg	gistered Agent:	
nerehy accept the appointment as registered agent.	I am familiar with and accept t	he obligations of the position.
	CA7 D	
Signo	ature of New Registered Agent,	if changing
heck if applicable		

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 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: 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>	Address
1) Change	Vol.	Kimberley Wisell	8205 NW 115 ave
Add		O	Ocala Fh. 34482
Remove			
2) Change			
Add			
Remove Change			
A'dd		_	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		-	
Remove			

amending or adding additional Arti tach additional sheets, if necessary).	(Be specific)	
		_
	A A A A A A A A A A A A A A A A A A A	
	1	
	· · · · · · · · · · · · · · · · · · ·	
	nange, reclassification, or cancellation of issued shares,	
rovisions for implementing the ame	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		_

The date of each amendment(s) ac	leption:	, if other than the
date this document was signed.		
Effective date if applicable:		Cl. January
	(no more than 90 days after amendmen	n fue aute)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors with	out shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast afficient for approval.	for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. To each voting group entitled to vote separately on the	he following statement amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for appro	val
by		·`
	(voting group)	
Dated 3-	04-2021	
	Pillotto	
Signature	lirector, president or other officer – if directors or off	icers have not been
selecte	d, by an incorporator – if in the hands of a receiver,	trustee, or other court
appoin	ted fiduciary by that fiduciary)	
	Linda Koette	e e
	(Typed or printed name of person signing	g)
	President	
	(Title of person signing)	

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 574480

Entity Name: DANIEL ROETTELE, INC.

Current Principal Place of Business:

2170 NW 47 CIRCLE OCALA, FL 34482

Current Mailing Address:

2170 NW 47 CIRCLE--163 OCALA, FL 34482 US

FEI Number: 59-1828614

Name and Address of Current Registered Agent:

ROETTELE, LINDA 2170 NW 47 CIRCLE OCALA FL 34482 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED

Jan 13, 2021 Secretary of State

9543774180CC

Certificate of Status Desired: No

Officer/Director Detail:

Title

Name

ROETTELE, LINDA

Address

2170 NW 47 CIRCLE

City-State-Zip: OCALA FL 34482

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if mede under outh; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Floride Statules, and that my name appears above, or on an attachment with all other like empowered.