

F120000004011

(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:

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2022 MAR -4 PM 12:14
CLERK OF STATE
TALLAHASSEE, FL

MAR 15 2022
ALBRITTON

2022 MAR -4 PM 5:42

Name
chg

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I200000000195

REFERENCE : 509985 8183004

AUTHORIZATION *[Signature]*

COST LIMIT 0.00 \$ 35.00

ORDER DATE : February 22, 2022

ORDER TIME : 2:15 PM

ORDER NO. : 509985-045

CUSTOMER NO: 8183004

FOREIGN FILINGS

NAME: LAFAYETTE ENGINEERING, INC.

XX _____ CORPORATE
 _____ LIMITED PARTNERSHIP
 _____ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX_____

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyllena Baker -- EXT#

EXAMINER:



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2022 MAR 14 AM 11:29
TALLAHASSEE, FLOR

March 7, 2022

CORPORATION SERVICE COMPANY

RESUBMIT

Please give original
submission date as file date.

SUBJECT: LAFAYETTE ENGINEERING, INC.
Ref. Number: F12000004011

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The alternate name listed in the document is already the name registered in Florida.

The name conflict is LAFAYETTE LLC - Document number L13000004203.

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.

Irene Albritton
Regulatory Specialist III

Letter Number: 522A00005414

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Lafayette Engineering, Inc.

Name of Corporation

DOCUMENT NUMBER: F12000004011

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm/Company

Address

City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Contact Person

at (_____)

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

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

COVER LETTER

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Name of Contact Person

at (_____) _____
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee,
Certificate of Status &
Certified Copy |
|--|--|---|---|

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
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10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Carmen Beth Robbins

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Beth Robbins

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILING FEE \$35.00



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN
ALTERNATE NAME FOR USE IN FLORIDA**

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Carmen Beth Robbins, do hereby certify
(Name)

that this Resolution of the Board of Directors of _____

Lafayette, Inc.

(Name of Corporation)

a corporation duly organized and existing under the laws of Kentucky,
(State or Country)

was adopted on March 9, 2022, adopting the alternate

name of Lafayette Engineering, Inc.
(Alternate Name) NOTE: Must contain a corporate suffix)

for use in Florida as its real name is unavailable in Florida.

Date: 3/9/2022

Carmen Beth Robbins

Signature of Chairman, Vice Chairman of the Board, a
director or any officer

CFO

Title of person signing

FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



Michael G. Adams
Secretary of State

Certificate

I, Michael G. Adams, Secretary of State for the Commonwealth of Kentucky, do hereby certify that the foregoing writing has been carefully compared by me with the original thereof, now in my official custody as Secretary of State and remaining on file in my office, and found to be a true and correct copy of

ARTICLES OF AMENDMENT OF

LAFAYETTE ENGINEERING, INC. CHANGING NAME TO LAFAYETTE, INC.
FILED FEBRUARY 11, 2022.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 24th day of February, 2022.



Michael G. Adams

Michael G. Adams
Secretary of State
Commonwealth of Kentucky
jdark/0263918 - Certificate ID: 265737



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

0263918.09

kdcoleman
AMD

Michael G. Adams
Kentucky Secretary of State
Received and Filed:
2/11/2022 9:10 AM
Fee Receipt: \$40.00

Division of Business Filings
P.O. Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Articles of Amendment
(Domestic Profit or Professional Services Corporation)

AMD

Pursuant to the provisions of KRS 14A and KRS 271B, the undersigned applies to amend articles of incorporation, and for that purpose, submits the following statements:

1. Name of the corporation on record with the Office of the Secretary of State is:

Lafayette Engineering, Inc.

(The name must be identical to the name on record with the Secretary of State.)

2. The text of each amendment adopted: The name of the corporation shall be amended to:

Lafayette, Inc.

3. If the amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment, if not contained in the amendment itself, are as follows:

4. The date of adoption of each amendment was as follows:

5. Check the option that applies (check only one option):

- ☐ The amendment(s) was (were) duly adopted by the incorporators prior to issuance of shares.
☐ The amendment(s) was (were) duly adopted by the board of directors prior to issuance of shares.
☒ The amendment(s) was (were) duly adopted by the incorporators or board of director without shareholder action as shareholder action was not required.
☐ If the amendment(s) was (were) duly adopted by the shareholders, the:
a) _____ Number of outstanding shares.
b) _____ Number of votes entitled to be cast by each voting group entitled to vote separately on the amendment.
c) _____ Number of votes of each voting group indisputably represented at the meeting.
d) _____ The total number of votes in favor of the amendment.
e) _____ The number of votes against the amendment.
f) _____ The number of votes cast for the amendment by each voting group was sufficient.

I declare under penalty of perjury under the laws of Kentucky that the foregoing is true and correct.

Signature of Officer or Chairman of the Board

Bruce Robbins
Printed Name

President
Title

11/2/21/2021
Date