

F1400000 3543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

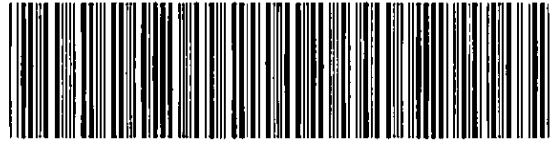
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600439056316

NLC Amend

2024 NOV 15 AM 10:44

FILED

2024 NOV 15 PM 3:20

FILED

A. RAMSEY
NOV 18 2024



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext: x62969
Date: 11/14/24
Order #: 1674426-3
Re: Iroquois Southwest, Inc.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Supporting Documents

Amount to be deducted from our State Account: \$35.00 - FL State Account Number:
I20000000195

A handwritten signature in black ink, appearing to read "Amanda Miller", is written over the text of the enclosed documents section.

Please take the following action:

File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Iroquois Southwest, Inc.

Name of Corporation

DOCUMENT NUMBER: F14000003543

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laurie A. Branch

Name of Contact Person

Iroquois Group, Inc.

Firm/Company

PO Box 806

Address

Olean, NY 14760

City/State and Zip Code

licensing@iroquoisgroup.com

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

For further information concerning this matter, please call:

Laurie A. Branch

Name of Contact Person

at (716) 373-5511

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

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PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F14000003543

(Document number of corporation (if known))

FILED
2024 NOV 15 AM 10:44
CLERK OF CIRCUIT COURT
IN AND FOR THE 17TH JUDICIAL CIRCUIT
IN FLORIDA

1. Iroquois Southwest, Inc.
(Name of corporation as it appears on the records of the Department of State)

2. Arizona
(Incorporated under laws of)

3. 8/22/2014
(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 11-1-24

5. Ironpeak Southwest, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)


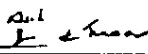
8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

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<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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.

 _____ (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	 _____ Treasurer
Laurie A. Branch _____ (Typed or printed name of person signing)	_____ (Title of person signing)

FILING FEE \$35.00

STATE OF ARIZONA



Office of the CORPORATION COMMISSION

The Executive Director of the Arizona Corporation Commission does hereby certify that the records of this agency show that

IROQUOIS SOUTHWEST, INC.

was incorporated or formed on the 27TH day of March, 2001.

The Executive Director further certifies that the above named entity changed its name to:

IRONPEAK SOUTHWEST, INC.

on the 1ST day of November, 2024.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission on this date: November 8, 2024.



Douglas R. Clark

Douglas R. Clark, Executive Director

BY: *Lynda B. Griffin*

LYNDA B. GRIFFIN