F47775

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Aprend. 3/15/19 DC



February 26, 2019

HOLLEY ABBOTT 618 US 90 EAST DEFUNIAK SPRINGS, FL 32433

SUBJECT: ALFORD BROTHERS, INC.

Ref. Number: F47775

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filled and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

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.

Letter Number: 519A00004016

Darlene Connell
Regulatory Specialist II Supervisor

SECTION IN PHIS: 08

RECEIVED

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Alford Brothers Inc F47715 DOCUMENT NUMBER: ___ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Holley Abbott
Name of Contact Person Alford Brothers Inc PO BOX 192

Address

DeFunick Springs FL 32435

City/ State and Zip Code Fires fone DFS @gmail. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Holley Abbott at (<u>850</u>) <u>585 - 4568</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☑ \$35 Filing Fee □\$43.75 Filing Fee & ■\$52,50 Filing Fee □S43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

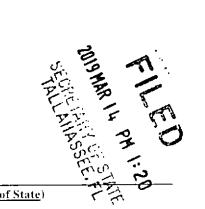
Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State) F47775 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/H The new name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corp." "Inc.," or "Co.". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Holley G. Abbett (18 US 90 East- (Florida street address) New Registered Office Address: Defundak Springs (City) Richards Testing Defusion (11 known) Richards Testing Defusion (12 known) Richards Testing Defusion (13 known) The new registered Defusion (13 known) The new registered agent and/or the new registered office address in Florida, enter the name of the new registered agent and/or the new registered office address. Name of New Registered Agent Holley G. Abbett (English Springs New Registered Office Address: New Registered Office Address: Defusion Springs (City) Richards Testing Defusion (13 known)	Alford	Brothers, Inc.			Tried is
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618 US 90 East (Florida street address)	D. If amending the registered agent and/ new registered agent and/or the new r	registered office addre	SS:	r the name of the	
	Name of New Registered Agent			<u> </u>	
New Registered Office Address: DeFuntak Springs Florida 32433 (City) (Zip Code)	-				
(City) (Zip Code)	New Registered Office Address:	Deruniak Sprin	ngs	, Florida	<u> 32433 </u>
			(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Significre 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.

Example: X Change	PT John Dog	
X Remove	<u>V</u> <u>Mike Jones</u>	
\underline{X} Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	PDTS <u>Catherine</u> L. Alford	PO BOX 192
Add		DeFuniak Springs FL 32435
<u>X</u> Remove		
2) Change	PDS Holley G. Abbott	618 US 90 East
X Add		DeFuniak, Springs, FL 32435
Remove	VDT Snane G. Abbott	618 US 90 East
3) ChangeX_ Add	<u> </u>	DeFunicik Springs, FL 32435
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
61 Change		
Add		
Remove		

<mark>If amending or addi</mark> Attach <i>additional sh</i> e	ng additional Arti rets, if necessary).	icles, enter_chans (Be specific)	<u>re(s) here</u> :	•			
N/A							
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If an amendment pr	rovides for an exc	hange, reclassific	cation, or ca	ncellation of	ssued shares,		
provisions for imp	lementing the amode, indicate N/A)	enament it not c	ontain <u>eu in t</u>	ne amename	it itsen.		
AIA	_						
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The date of each amendment(s) adoption: 3-07-2019	if other than the
date this document was signed.	
Effective date if applicable: 3- c7-z019 (no more than 90 days after amendme	
(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filing r document's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. To must be separately provided for 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 approx	ral
by	.
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder a action was not required.	ction and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder
Dated	0-
(B) a director, president or other officer – if directors or of selected, by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	ficers have not been trustee, or other court
Holley G. Abbott (Typed or printed name of person signing)	ng)
	<i>=</i> ′
President (Title of person signing)	
(title of person agains)	