

F94000005029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

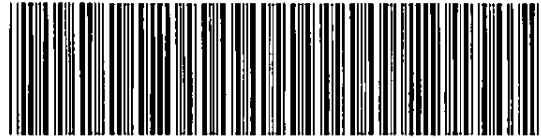
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NIC Amend

FILED  
2024 SEP -5 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A. RAMSEY

SEP 6. 2024

RECEIVED  
2024 SEP -5 PM 2:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302**

**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE: 09/05/2024**

**NAME: FAHLGREN, INC.**

**TYPE OF FILING: AMENDMENT**

**COST: 35.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Fahlgren, Inc.

Name of Corporation

DOCUMENT NUMBER: F94000005029

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brennon Martin

Name of Contact Person

Firm/Company

813 Ridge Lake Blvd.

Address

Memphis, TN 38120

City/State and Zip Code

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

For further information concerning this matter, please call:

Brennon Martin

Name of Contact Person

at ( 901 ) 413 1552  
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

**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)**

F94000005029

(Document number of corporation (if known))

FILED  
2024 SEP - 5 AM 11:43  
CLERK OF THE  
SUPREMACY OF FLORIDA

1. Fahlgren, Inc.  
(Name of corporation as it appears on the records of the Department of State)
2. West Virginia 3. 09/28/1994  
(Incorporated under laws of) (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? 05/14/2024
5. Eastport FM 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 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

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(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.*

Signature of New Registered Agent, if changing

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

<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)

Homer C Patton

(Typed or printed name of person signing)

Chairman

(Title of person signing)

FILING FEE \$35.00



*I, Mac Warner, Secretary of State of the  
State of West Virginia, hereby certify that*

Articles of Amendment to the Articles of Incorporation of

**FAHLGREN, INC.**

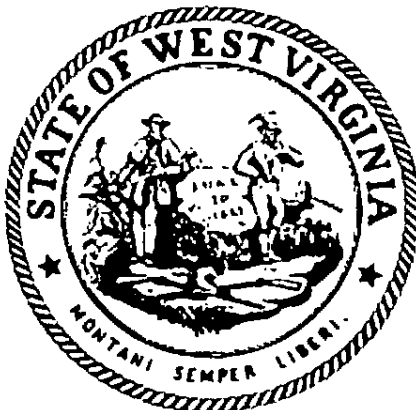
Are filed in my office as required by the provisions of the West Virginia Code and are found to conform to law.

Therefore, I hereby issue this

**CERTIFICATE OF AMENDMENT TO THE  
ARTICLES OF INCORPORATION**

changing the name of the corporation to

**EASTPORT FM, INC.**



*Given under my hand and the  
Great Seal of the State of  
West Virginia on this day of  
May 23, 2024*

*Mac Warner*

*Secretary of State*

154852