J05346

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: PEERLESS LAN	D DEVELOPMENT, INC.		
DOCUMENT NU				
The enclosed Artici	les of Amendment and fee are si	ibmitted for filing.		
Please return all con	rrespondence concerning this ma	atter to the following:		
	PATRICIA C BOBANIC			
		Name of Contact Perso	n	
		Firm/ Company		
	5008 GARRICK COURT			
	· · · · · · · · · · · · · · · · · · ·	Address		
	TAMPA, FL 33624			
		City/ State and Zip Cod	e	
	GREG.BOBANIC@GMAIL	СОМ		r×2
	E-mail address: (to be u	sed for future annual report	notification)	
For further informat	tion concerning this matter, plea	se call:		_ ;
PATRICIA C BOB	ANIC	at (⁸¹³	503-4353	 - -
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street	Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

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Peerless Land Deve	
	filed with the Florida Dept. of State)
J0534L	ø
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must he distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1456 Kensington Woods Dr. Lutz, FL 33549
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1456 Kensington Woods Dr. Lutz, FL 33549
D. If amending the registered agent and/or registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent Gregory	Bobanic -
J 1	nsington Woods Dr.
New Registered Office Address: Lutz	City) , Florida 33549 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

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 Mtke 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	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Şally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PDST	Basil Bobanic	5008 Garricket.
AddRemove			Tampa, FL 33624
2) Change	PDT	Gregory Bobanic	1456 Kensington Woods Dr. Lutz, FL 33549
X Add			Lutz, FL 33549
Remove 3) Change	VSD	andrea Bobanic	
X_Add			1456 Kensington woods Dr.
Remove			Lutz, FL 33549
4) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change			
Add			
Remove			<u> </u>
6) Change			
Add			
Remove			

					
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n amendment provides for an ex	change, reclassifica	tion, or cancellat	ion of issued sha	res,	
ovisions for implementing the an (if not applicable, indicate N/A)	nendment if not con	tained in the am	endment itself:		
(ly not applicable, maleute 1971)					

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date if applicable:	8/31/2027	
	(no more that 90 days after amendment file date)	
Note: If the date inserted in this blocdocument's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this da artment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(scient for approval.	s)
☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders through voting groups. The following statements of voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected, I	Mices O. Solve e ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other counfiduciary by that fiduciary)	t
_	(Typed or printed name of person signing)	
_	V-PRES OIRELTOR (Title of person signing)	
	(Title or person signing)	•
		•