

J35557

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

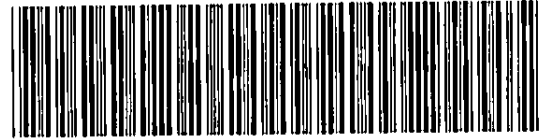
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: HYGEMA HOUSE MOVERS, INC.

DOCUMENT NUMBER: J35557

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN DAVID HORNE

Name of Contact Person

FULLER, DUSINBERRE, HORNE, PLLC

Firm/ Company

1845 EAST WEST PARKWAY, SUITE 18

Address

FLEMING ISLAND, FL 32003

City/ State and Zip Code

hbm1986@bellsouth.net

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

For further information concerning this matter, please call:

ALBERT J. BOYLES, JR.

Name of Contact Person

at ( 904 )

509-3462

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 &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**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

Articles of Amendment  
to  
Articles of Incorporation  
of

HYGEMA HOUSE MOVERS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

J35557

(Document Number of Corporation (if known))

FILED

2024 SEP -3 PM 2:06

SECRETARY OF STATE  
TALLAHASSEE, FL

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:**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "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**)

**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

(Florida street address)

New Registered Office Address:

(City)

Florida

(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

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 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 Doe

X Remove                    V        Mike Jones

X Add                        SV        Sally Smith

| Type of Action<br>(Check One) | Title         | Name                         | Address                         |
|-------------------------------|---------------|------------------------------|---------------------------------|
| 1) <u>      </u> Change       | <u>P</u>      | <u>RICHARD M. BOYLES</u>     | <u>5404 STATE ROAD 218 WEST</u> |
| <u>      </u> Add             |               |                              | <u>MIDDLEBURG, FL 32068</u>     |
| <u>X</u> Remove               |               |                              |                                 |
| 2) <u>X</u> Change            | <u>PST</u>    | <u>ALBERT J. BOYLES, JR.</u> | <u>5404 STATE ROAD 218 WEST</u> |
| <u>      </u> Add             |               |                              | <u>MIDDLEBURG, FL 32068</u>     |
| <u>      </u> Remove          |               |                              |                                 |
| 3) <u>      </u> Change       | <u>      </u> | <u>      </u>                | <u>      </u>                   |
| <u>      </u> Add             |               |                              | <u>      </u>                   |
| <u>      </u> Remove          |               |                              | <u>      </u>                   |
| 4) <u>      </u> Change       | <u>      </u> | <u>      </u>                | <u>      </u>                   |
| <u>      </u> Add             |               |                              | <u>      </u>                   |
| <u>      </u> Remove          |               |                              | <u>      </u>                   |
| 5) <u>      </u> Change       | <u>      </u> | <u>      </u>                | <u>      </u>                   |
| <u>      </u> Add             |               |                              | <u>      </u>                   |
| <u>      </u> Remove          |               |                              | <u>      </u>                   |
| 6) <u>      </u> Change       | <u>      </u> | <u>      </u>                | <u>      </u>                   |
| <u>      </u> Add             |               |                              | <u>      </u>                   |
| <u>      </u> Remove          |               |                              | <u>      </u>                   |

**F. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.


**Adoption of Amendment(s) (CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(voting group)

Dated 06-28-2024

Signature   
(By a director, ~~president~~ or other officer -- if directors or officers have not been selected, by an incorporator -- if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Albert J Boyles Jr.  
(Typed or printed name of person signing)

President  
(Title of person signing)



**FULLER DUSINBERRE HORNE**

**Barry J. Fuller, Esq.**  
BFuller@FDHAttorneys.com

**Elizabeth S. Dusinberre, Esq.**  
EDusinberre@FDHAttorneys.com

**John David Horne, Esq.**  
JHorne@FDHAttorneys.com

1845 East West Parkway, Suite 18  
Fleming Island, Florida 32003  
Telephone (904) 264-0585 Fax (904) 264-1714

August 30, 2024

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314  
ATTEN: ANISSA BUTLER

RE: Hygema House Movers, Inc.  
Ref. Number: J35557

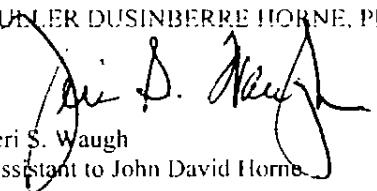
Dear Ms. Butler:

Regarding the above-named Corporation, enclosed is our Application for Amendment. You are already in receipt of our check for the \$35 Filing Fee.

Thank you for your assistance in this matter. Should you have questions or need additional information, please do not hesitate to contact our office.

Sincerely,

FULLER DUSINBERRE HORNE, PLLC

  
Jeri S. Waugh  
Assistant to John David Horne

Enclosures



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 7, 2024

JOHN DAVID HORNE  
1845 EAST WEST PARKWAY  
SUITE 18  
FLEMING ISLAND, FL 32003

SUBJECT: HYGEMA HOUSE MOVERS, INC.  
Ref. Number: J35557

We have received your document for HYGEMA HOUSE MOVERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

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.

Anissa Butler  
Regulatory Specialist II

Letter Number: 024A00017389