J54949

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GUY	HARVEY	INC	
DOCUMENT NUMI		554949		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	14-	RVEY TAG	RIEN	
		Name of Contact Perso		
		GUY HARVE	YINC	
		Firm/ Company		
	5470 NW 1	OM TERRAC	É	
		Address		
	FALT LANDER	City/ State and Zip Coo	33309	
	LARVEY @	GUY HARVEY.	CAM	
	E-mail address: (to be u	sed for future annual repor	1 notification)	
For further informatio	n concerning this matter, plea	se call:		
11 AO VEY	TAULEN	954	235-7146	
	of Contact Person	at (^	ode & Daytime Telephone Number	
e i e e e e				
Enclosed is a check to	or the following amount made	payable to the Florida Dej	partment of State:	,
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		t Address	1 1 C
	endment Section ision of Corporations		idment Section ion of Corporations	- in
	. Box 6327	The C	Centre of Tallahassee	
Tall	ahassee, FL 32314	2415	N. Monroe Street, Suite 810	

Tallahassee, FL 32303

1.1

Articles of Amendment to Articles of Incorporation

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60	Y HARVEY	110		
(Name of Corporat		with the Florida Dept. of State	<u>e)</u>	
	554949			
	ment Number of Corpo	ration (if known)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	la Statutes, this <i>Florida</i>	Profit Corporation adopts the	following amend	ment(s) to
A. If amending name, enter the new name of the c	corporation:	, A	The n	new
name must be distinguishable and contain the word "c". "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	," or "Co". A profes			
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Be) D. If amending the registered agent and/or register		Florida, enter the name of the		
new registered agent and/or the new registered		A 1 1 .		ت صن
Name of New Registered Agent		NA		Star 18
	(Florida street addr	ress)	- .	Ž.
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing Re	gistered Agent:			7, 0
I hereby accept the appointment as registered agent.	I am familiar with and	d accept the obligations of the p	osition.	
Sign	nature of New Registere	ed 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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	CFO	TEBBE-SHEMELYA, JANE	5470 NW 10th TERRACE
Add		,	5470 NW 10th TERRACE FT. LANDERDACE, FL
X Remove			33309
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			5
Remove			77. 57. 19
5) Change		_	
Add			- Ini
Remove			
6) Change			
Add			
Remove			

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an amendment provides for an exchange, rovisions for implementing the amendmen	reclassification, or cancellation of issued	shares,
(if not applicable, indicate N/A)	th not contained in the amenument user	ii:
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The date of each amendment(s) adoption:	her than th
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 document's effective date on the Department of State's records.	listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareho action was not required.	older
☐ 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 Guy HARVEY, INC	
(voting group)	
Dated	
Signature H. Tel.	
(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)	,
HARVEY TAULES	793 S
(Typed or printed name of person signing)	 -
(00	co
(Title of person signing)	三 (2)