J92113

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COVER LETTER

Division of Corporat			
NAME OF CORPORA	TION: BOKE	and Poor	Surplus, Inc.
DOCUMENT NUMBER	r: <u>94211</u>	5	
The enclosed Articles of	Amendment and fee are si	ubmitted for filing.	
Please return all correspo	ndence concerning this ma	atter to the following:	
	Lin. Broke	Name of Contact Person 2 and Paor of Firm/ Company	Surplus,-Inc
	POBO	x 133	
	Aubu	Address Address Color Fl. City/ State and Zip Code	33823
_	Brokeana E-mail address: (to be u	Suple Suple annual report	15@gmail.com
For further information co	oncerning this matter, plea	ase call:	
Sarah Ma Name of C	Contact Person	at (43 Area Coo	875 - 2LD2 de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	ortment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend	g Address ment Section n of Corporations	Amend	Address ment Section n of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ently filed with the Florida Dept. of State)
Broke and Poo	r Surplus Inc J92/13
	er of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	£
	The new
ame must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co". chartered," "professional association," or the abbreviation "P.)	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	بن المارين ال
	
 If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre 	daress in Florida, enter the name of the
-	533.
Name of New Registered Agent	
(Florida New Registered Office Address:	street address)
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Age	ent:
hereby accept the appointment as registered agent. I am familia	ir with and accept the obligations of the position.
	1

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	<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) K Change	I	Linda L. Fletcher P.O. Box 133
		auburndale, Fl.
Remove		33823
2) Change	\supset	Sarah M. M. Coraudale PO Box 133
X Add		auburdale, Fl.
Remove 3) Change		33823
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

(Attach additional she	ng additional Articles, enter char ets, if necessary). (Be specific)	
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If an amendment pro	ovides for an exchange, reclassifi	cation, or cancellation of issued shares,
provisions for imple (if not applicable	menting the amendment if not e e. indicate N/A)	ontained in the amendment itself:
C P -	,	
.		
		<u> </u>
		1.11
		1-11
		1 11
		,

Гhe 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, the document's effective date on the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholde action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following st 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)	
Signature (By a director, president or other officer – in directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Charles E. McCoraudo (Typed or printed name of person signing)	ale
President	
(Title of person signing)	