K35711

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SECRETARY OF STATE AHASSEE, FLORID

AUG 2 7 2021

A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: SWISS AM, I	NCORPORATED
DOCUMENT NUMBER: K35717	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
JAMES E. BURGUND	
	Name of Contact Person
<u>-</u>	Firm/ Company
4492 SW BRANCH TE	RRACE
	Address
PALM CITY, FL 34990)
	City/ State and Zip Code
james@swissam1.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
JAMES E. BURGUND	at (772) 708-6188
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount r	nade payable to the Florida Department of State:
\$35 Filing Fee	-
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	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

FILED

SWISS AM, INCORPORATED				2001	Alle
	(Name of Corpora	ition as currently	filed with the Florid	da Dept. of Sta	<u>846 17 PH 12 32</u>
K35717				580. TALI	NETARY OF STATE
	(Doct	ument Number of	Corporation (if know	'n)	THISEELFLORIS
Oursuant to the provisions of sects Articles of Incorporation:	etion 607.1006, Flori	ida Statutes, this F	lorida Profit Corpor	ation adopts the	following amendmen
A. If amending name, enter the	ne new name of the	corporation:			
name must be distinguishable an "Inc.," or Co.," or the design "chartered," "professional asso	ation "Corp." "Inc	c." or "Co". A	ompany," or "incorpo professional corpor	orated" or the al ation name mu	The new bbreviation "Corp.," st contain the word
3. Enter new principal office	address, if applicab	ole:			
Principal office address <u>MUST</u>	BE A STREET AL	ODRESS)			
C. Enter new mailing address (Mailing address MAY BE)	s, if applicable: 4 <i>POST OFFICE B</i>	(<u>OX</u>)			
). If amending the registered new registered agent and/o	r the new registered	ered office addre d office address:	ss in Florida, enter	the name of the	
Name of New Registere	<u>d Agent</u>	<u>-</u>			
		(Florida stree	d addays)		
		(Fioriau siree	i aaaress)		
New Registered Office A	Address:		lity)	, Florida	(Zip Code)
iew Registered Agent's Signat hereby accept the appointment	ure, if changing Re as registered agent.	e <mark>gistered Agent:</mark> I am familiar wi	th and accept the obli	igations of the p	, ,
·					
	Sigi	nature of New Reg	istered Agent, if char	iging	
heck 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.

X Change	<u>PT</u>	John Doc				
X Remove	V	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s			
1) Change	AR	JAMIE LYNN BURGUND	4492 SW BRANCH TERRACE			
XX Add			PALM CITY, FL 34990			
Remove						
2) Change	**					
Add						
Remove 3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add			-			
Remove			1			
<i>δ</i>) Change						
Add						
Remove						

	ding additional Articheets, if necessary).	(Be specific)				
						
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			<u>.</u>			
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an amendment p rovicione for imr	rovides for an exch	ange, reclassifica	tion, or cancella	tion of issued	shares,	
(if not applical	olementing the amer ble, indicate N/A)	iument ii not con	itaineo in the an	nenament itse	<u>II:</u>	
				·		
-						
						
						
						.,

The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requiren partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the fficient for approval.	amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The followard voting group entitled to vote separately on the amendates	rwing statement ment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
13 AUGUS Dated Signature (By a di	rector, president or other officer – if directors or officers ha	ve not been
selected	by an incorporator – if in the hands of a receiver, trustee, and fiduciary by that fiduciary)	or other court
	IAMES E. BURGUND	
·	(Typed or printed name of person signing)	
	PTD	
-	(Title of person signing)	