K90178

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01/04/19--01015--024 **52.50



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Killebrew, Inc.		
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Denise Henderson		
		Name of Contact Person	
	Killebrew, Inc.		
		Firm/ Company	
	PO Box 6258		
		Address	
	Lakeland, FL 33807-6258		
		City/ State and Zip Code	 -
donie	e@killebrewinc.net		
	•	sed for future annual report i	notification)
	D man address, (to or a	ou for ratery annual report	
For further informatio	n concerning this matter, pleas	se call:	
Denise Henderson		at (863	701-0273
Name (Name of Contact Person Area Code & Daytime Telephone Nu		le & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	rtment 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)
Ame Divi P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amendi Division Clifton 2661 E:	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

Killebrew, Inc.			
(<u>Name o</u>	of Corporation as current	ly filed with the Florida Dept. of	State)
K90178			
**************************************	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopt	s the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp" "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corporation	
B. Enter new principal office address,	if applicable:	N/A	
(Principal office address MUST BE A S			5
			1
C. Enter new mailing address, if appli		N/A	;;·
(Mailing address MAY BE A POST)	<u>OFFICE BOX</u>)		
			
D. If amending the registered agent an new registered agent and/or the new			of the
Name of New Registered Agent	Denise Henderson		
Name of New Augustica Agent	2830 Winter Lake Rd	,	
	(Florida s	treet address)	
New Registered Office Address:	Lakeland	CI	33803 orida
New Registered Office Address.		(City)	(Lip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			the position.
[rus:	· And vecco	ı~	
	Signature of New	Registered Agent, if changing	

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>	<u>Name</u>	Address
1) Change	VTS	Cynthia D Adamson	<u> </u>
Add X Remove			
2) Change	<u>V</u>	James E Dickerson	., <u>)</u>
Add X Remove			
3) Change	<u>v</u>	Richard S Bushart	10810 Pathfinder Trail
X Add			Lakeland, FL 33809
Remove			····
4) Change	<u>V</u>	lan A Lund	1166 Colony Arms Dr
X Add			Lakeland, FL 33813
Remove			
5) Change	VTS	Denise M Henderson	207 Rogers Terr
X Add			Lakeland, FL 33803
Remove			
6) Change		_	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	
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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)	
N/A	

The date of each amendment(s) adoption:	, if other than t
late this document was signed.	, it other than t
1/1/2019 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 locument's effective date on the Department of State's records.	will not be listed as t
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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)	
(voting group)	づ
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	(1) 22 1 1
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
1/2/2019	Θ
Dated	2
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)	
William C Thomas IV	
(Typed or printed name of person signing)	
President	
(Title of person signing)	