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## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 12, 2021

ALLEN - DUNCAN AGENCIES, INC. 490 B GARDEN STREET TTITUSVILLE, FL 32796

SUBJECT: ALLEN - DUNCAN AGENCIES, INC.

Ref. Number: K96743

We have received your document for ALLEN - DUNCAN AGENCIES, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 921A00024831

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

Division of Communations D.O. DOV 6207 Tellaborate Elevide 2021

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Allen - Du	incan Agenci	es alno.	
DOCUMENT NUMB	O A.	6743 V	·	
The enclosed Articles of	f Amendment and fee are sul	omitted for filing.		
Please return all corresp	oondence concerning this mat	ter to the following:		
- -	Allen-Dun 490 B Ga	Name of Contact Person Can Agency Firm/ Company arden St. Address 14, FL 3276 City/ State and Zip Code and for future annual report	us alno.	
<del>-</del>	E-mail address: (to be us	ed for future annual report	notification)	
For further information	concerning this matter, pleas	e call:		
Melissa D Name o	Strichland Contact Person	at ( 321 Area Cod	le & Daytime Telephone Number	
Enclosed is a check for	the following amount made			
☐ \$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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

	Corporation as currently		
49u			
		Corporation (if known)	·•
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>F</i>	lorida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new nar	ne of the corporation:		
N/A			Thenew
name must be distinguishable and contain t "Inc.," or Co.," or the designation "Co "chartered," "professional association," of	rp," "Inc," or "Co". A	ompany," or "incorporated professional corporation	l" or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if (Principal office address <u>MUST BE A ST</u>	applicable <u>:</u> REET ADDRESS )	MA	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		NA	2021 T. T. Z.
D. If amending the registered agent and new registered agent and/or the new	Vor registered office addr registered office address:	ess in Florida, enter the n	ame of the FL
Name of New Registered Agent	Melissa I	), Stricklar	nd m w
-	490 B Ga (Florida stre	rolen St.	
New Registered Office Address:	MITUSVILL	City)	, Florida
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	anging Registered Agent: red agent. I am familiar-w	eith and accept the obligation	ons 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) (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)

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:	DT	John Dog	
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>	<u>Addres</u> s
1) X Change	7	Melissa Duncan	to Melissa D. Stricklan
Add Remove			490 B. Garden St.
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or	radding additional Arti nal sheets, if necessary).	icles, enter change (Be specific)	(s) here:		
N/A		<del></del>	<u></u>		
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F. If an amendme	ent provides for an excl r implementing the ame	hange, reclassificat	ion, or cancellatio	n of issued shares,	
if not app	olicable, indicate N/A)	indifferent in not con	tanico in the anici	differentiation.	
AIN					
10(1)					
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	ch amendment(s) adoption:, if other than the ment was signed.	he
Effective date <u>i</u>	if applicable:  (no more than 90 days after amendment file date)	
Note: If the da document's effe	ate inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a ective date on the Department of State's records.	he
Adoption of Ar	mendment(s) ( <u>CHECK ONE</u> )	
The amendm action was n	nent(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder not required.	
	nent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) cholders was/were sufficient for approval.	
☐ The amendm must be sept	nent(s) was/were approved by the shareholders through voting groups. The following statement parately provided for each voting group entitled to vote separately on the amendment(s):	
"The n	number of votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	Dated	
	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)  (Typed or printed name of person signing)	