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D	ate:	7/18/2019	MI	
		Acc#I20160000072	a: DW	
Name:	NAVARRE	LUMBER & SUPPLY, IN	NC. / MEON, Inc.	
Document #:				
Order #:	11979134			
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy				
Apostille/Notarial Certification:		Country of Destination: Number of Certs:		
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Thank you!

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Navarre Lumber &	Supply, Inc.			
DOCUMENT NUMB	T 36214				
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corres	pondence concerning this mat	ter to the following:			
	Lynn Visser				
		Name of Contact Persor	I		
	Womble Bond Dickinson (US) LLP				
		Firm/ Company			
	550 South Main Street, Suite	• •			
		Address			
	Greenville, SC 29601				
		City/ State and Zip Code			
For further information	E-mail address: (to be us	ed for future annual report	nouncation)		
Lynn Visser		864 at (255-5452		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	artiment of State:		
S35 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)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

	_	
(Name of Corporation as curren	tly filed with the Florida D	ept. of State)
L36214		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation	n adopts the following amend
A. If amending name, enter the new name of the corporation:		
MEON, Inc.		The n
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corp	orporated" or the abbreviate poration name must contain
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		2011
		. 📆
C. Enter new mailing address, if applicable:	N//	\$\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(Mailing address MAY BE A POST OFFICE BOX)	N/A 	
		ن د ا
		(a) ; #
		
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the	name of the
new registered agent and/or the new registered office addre	<u>255:</u>	
X7/4		
Name of New Registered Agent N/A		
Name of New Registered Agent N/A		
Name of New Registered Agent	street address)	
Name of New Registered Agent	street address)	, Florida(Zip Code)

D--- 1 -F 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, na 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 Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. 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 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Mike Jones, V as Remove Example:	, and Sal	ly 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	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			20 Prop. 20
2) Change		<u> </u>	2919 JUL
Add			
Remove			<u> </u>
3) Change		_	mys t
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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If an amendment provides for an exchange, reclassification, or can	
If an amendment provides for an exchange, reclassification, or can provisions for implementing the amendment if not contained in the (if not applicable, indicate N/A)	te amendment risen.
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July 11, 2019	16 .1
The date of each amendment(s) adoption:	, if other 1
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, this date document's effective date on the Department of State's records.	will not be listed
Adoption of Amendment(s) (CHECK ONE)	
☐ 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by·"	
(voting group)	28 28 28 28
 The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. 	JUL 18 AM
Dated 7/16/19 Signature UUUUU	14 16
(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)	
Robert Killingsworth	
(Typed or printed name of person signing)	
President	
(Title of person signing)	