M36476

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TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	DRATION: A.B.C. RANCH, I	NC.		•	
DOCUMENT NUM					
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	ANDREW J HIGGINBOTH.	AM			
		Name of Contact Person	1		
	LABELLE CPA, PA				
		Firm/ Company			
	P O BOX 1466				
		Address			
	LABELLE, FL. 33975				
		City/ State and Zip Cod	e		
	ANDY@LABELLECPA.CO	M			
	E-mail address: (to be us	ed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:		Ŋ	
ANDREW J HIGG	INBOTHAM	at (863	675-3903	20 DEC	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	22.	- +
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:	77	- i
S35 Filing Fee	S43.75 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)	04 ::	
	ailing Address		Address		
	nendment Section vision of Corporations		ment Section n of Corporations		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of



A.B.C. RANCH, INC

(<u>Name</u>	of Corporation as curre	ntly filed with the Florid	da Dept. of State)	
M36476				
<u> </u>	(Document Numbe	r of Corporation (if know	m)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	sis <i>Florida Profit Corpor</i>	ration adopts the fol	llowing amendment(s)
A. If amending name, enter the new n	ame of the corporation:			
N/A				The new
name must be distinguishable and contait "Inc.," or Co.," or the designation "("chartered," "professional association,	Corp," "Inc," or "Co".	A professional corpor	orated" or the abbration name must o	eviation "Corp.,"
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>		N/A		
		 .		-
				
	Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
(Manning address MATT DE N. 1 001	OTTICE BOTT			
		·		
				
D. If amending the registered agent as			the name of the	
new registered agent and/or the ne		ess:		
Name of New Registered Agent	N/A			
	.,			
	(Florida	street address)		
New Registered Office Address:	N/A		, Florida	
New Registered Office Address.		(City)	, 1101100	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Age	<u>nt:</u>		
hereby accept the appointment as regis	tered agent. I am familia	ir with and accept the obi	ligations of the posi	tton
	Signature of New	Registered Agent, if cha	nging	
	0.6		· • · · · •	
Check if applicable				
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (1	l) (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)

Example:

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	PT	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
<u>X</u> Add	<u>sv</u>	Sally Sr	nith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	T	_	SOLON C. MILLS III	1540 CEMETERY RD
X Add				LABELLE, FL. 33935
Remove				
2) Change				
Add				
Remove 3) Change				
Add		••		
Remove				
4) Change		<u> </u>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_ 		
Add		•		
Remove				

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	(200)
	·
•	
F. If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amen (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(If not applicable, indicate IV/A) N/A	
	
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	N/A	10t Ab-	_ 46.
The date of each amendment((s) adoption:	, if other the	in the
late this document was signed.	N/A		
Effective date <u>if applicable</u> :	(no more than 90 days after amer	ndment file date)	
	•		ac the
Note: If the date inserted in the locument's effective date on the	his block does not meet the applicable statutory file Department of State's records.	ling requirements, this date will not be listed to	as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were action was not required.	e adopted by the incorporators, or board of directors	s without shareholder action and shareholder	
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes re sufficient for approval.	s cast for the amendment(s)	
must be separately provided	e approved by the shareholders through voting groud for each voting group entitled to vote separately of cast for the amendment(s) was/were sufficient for a	n the whentinents).	
BOARD OF DIRE		n -	
by	(voting group)		
_	MBER 15, 2020		
Dated	Lolon Cu MO		
DatedSignature 🔀 (By sel	Le Ca MO	or officers have not been siver, trustee, or other court	
DatedSignature 🔀 (By sel	y a director, president or other officer - if directors dected, by an incorporator - if in the hands of a rece	or officers have not been siver, trustee, or other court	
DatedSignature 🔀 (By sel	y a director, president or other officer – if directors lected, by an incorporator – if in the hands of a rece pointed fiduciary by that fiduciary)	aver, trustee, of other count	
DatedSignature 🔀 (By sel	y a director, president or other officer - if directors lected, by an incorporator - if in the hands of a rece pointed fiduciary by that fiduciary) SOLON C MILLS JR.	aver, trustee, of other count	
DatedSignature 🔀 (By sel	y a director, president or other officer – if directors lected, by an incorporator – if in the hands of a rece pointed fiduciary by that fiduciary) SOLON C MILLS JR. (Typed or printed name of person s	aver, trustee, of other count	
DatedSignature 🔀 (By sel	y a director, president or other officer – if directors lected, by an incorporator – if in the hands of a recepointed fiduciary by that fiduciary) SOLON C MILLS JR. (Typed or printed name of person some president of the person some president or other officer – if directors are president or other officer – if directors are person some president or other officer – if directors are person some president or other officer – if directors are person some president or other officer – if directors are person some president or other officer – if directors are person some president or other officer – if the person some president or other preside	aver, trustee, of other count	

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