M40936

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COVER LETTER

NAME OF CORPORATION: 295COVICH FNC.

DOCUMENT NUMBER: MY 936

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LICHARD FDAMELS BELKELEY BOWLES

Firm/Company

4000 Pance Dever Devel Stute #500

Address

COLAR OADIES FLORIDA 33146

City/State and /tip Code

LDAMIELS D. D. D. LAW. CAN

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAMAD W. DAMIELS

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee &

(Additional copy is

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enclosed)

Mailing Address

\$35 Filing Fee

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$43.75 Filing Fee &

Certificate of Status

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to Articles of Incorporation of

245	COVICH, IN	K			
	_	filed with the Florida	Dept. of State)		
	M 40936	———— <u>—</u>	 		
((Document Number of	Corporation (if known)		-	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this I	Florida Profit Corporati	ion adopts the follo	wing amendmer	nt(s) to
A. If amending name, enter the new name of	the corporation:				
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	-Corn." "mc " ar "C	"" A professional on	corporated" or the rporation name mi	The new e abbreviation ust contain the	
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET	licable: TADDRESS)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	<u>'E BOX</u>)			20:0	
D. If amending the registered agent and/or re new registered agent and/or the new regist	gistered office addres ered office address:	s in Florida, enter the	name of the	-3 FH 3: 48	1 .
Name of New Registered Agent	RICHARD 6	. DANIELS	Esa.		
	Costperior Strate	NCE DE leo Maries, FU	N BLVD,	Suite d	800
New Registered Office Address:	(C.		, Florida	p Code)	
New Registered Agent's Signature, if changing hereby accept the appointment as registered age	Registered Agent: ent. I am familiar with	and accept the obligat	ions of the position		
		stered Agent, if changin	>		
,	Signature of New Regi	stered Agent, if changin	18		

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 PT John Doe X Remove V Mike Jones $X \wedge Add$ <u>SV</u> Sally Smith Type of Action Title Name Address (Check One) 1) ____ Change ____ Add ____ Remove 2) ___ Change ____ Add ____ Remove 3) ____ Change __ Remove 4) ____ Change ____ Add ____ Remove 5) ____ Change ___ Add Remove

6) ____ Change

__ Add

__ Remove

smending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
,	
<u> </u>	
<u> </u>	
an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
rovisions for implementing the amen	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

The date of each amendment(s) adoption: May (, 2019 , if other than the date this document was signed.
Effective date if applicable: 144 (, 2019 (no more than 90 days after amendment file date)
(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 will not be listed as the document's effective date on the Department of State's records.
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 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
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.
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)
BERNARD ZYSCOVICH
(Typed or printed name of person signing)
CEO/PRESIDENT
(Title of person signing)