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6/21/23 VIN TILED

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: _____

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Gerald Dake
Name of Contact Person
Gerald Dake & Associates, Inc
Firm/ Company
13617 Atlantic boulevard
Address
Jacksonville, Florida 32225
City/ State and Zip Code
odyssey1947@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gerald Dake	904 at ()	993-6038
Name of Contact Person	Area Code a	& Daytime Telephone Number

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

🔳 \$35 Filing Fee

Certificate of Status

Statistical States (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 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

_The _new

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

В.	Enter new principal office address, if applicable:	
(Pi	rincipal office address <u>MUST BE A STREET ADDRESS</u>)	

C.	Enter new mailing address, if appl (Mailing address MAY BE A POST			2023 APF	
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			••••	AM	m
Đ.	If amending the registered agent ar new registered agent and/or the new	d/or registered office address in Florida, ente v registered office address:	r the name of the	9: 4 1	
	<u>Name of New Registered Agent</u>	Gerald Dake			
		13617 Atlantic Boulevard			
		(Florida street address)		—	
New Registered Office Address:	Jacksonville	32225 Florida			
		(City)	(Zi	p Code	<u>, </u>

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

10 200 PD

Signature of New Registered Agent, if changing

Check if applicable

□ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c). 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 <u>PT</u> John Doe X Remove Mike Jones Y <u>SV</u> Sally Smith <u>X</u> Add Address Type of Action Title Name (Check One) Р 13617 Atlantic Boulevard Frederick L. Dake 1) ____ Change Jacksonville, FL 32225 ____ Add Х Remove Gerald L. Dake 13617 Atlantic Bouilevard р 2) ____ Change Jacksonville, FL 32225 Х Add ___ Remove 3) ____ Change _ Add ____ Remove 4) ____ Change Add Remove 5) ____ Change ___ Add Remove 6) ____ Change _ Add Remove

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E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

_____ 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)

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The date of each amendment(s) adoption: _____ date this document was signed.

, if other than the

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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- E The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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

(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)

yped or printed name of person signing)

(Title of person signing)