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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	CENTRAL PASCO	AND GULD RAILR	OAD INC.		_
NO DOCUMENT NUMBER:	06000011661				
The enclosed Articles of Amen	dment and fee are subr	nitted for filing.			
Please return all correspondenc	e concerning this matte	r to the following:			
SMITHSON, JERRY					
		(Name of Contact Pe	erson)		_
SMITHSON, JERRY					
		(Firm/ Company	7)		_
CENTRAL PASCO AND GUI	LF RAILROAD INC.				
		(Address)			_
4411 EDITH STREET					
		(City/ State and Zip	Code)		
NEW PORT RICHEY FL. 346	552				
E-m	ail address: (to be used	for future annual rep	ort notification	n)	_
For further information concern	ing this matter, please	call:			
SMITHSON, JERRY		at	727	243 3692	
(N	ame of Contact Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following	owing amount made pa	yable to the Florida I	Department of	State:	
■ \$35 Filing Fee C	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certit s Certit	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section		Street Address Amendment Section			

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

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

Articles of Amendment to Articles of Incorporation of

rently filed with the Flori	ida Dept. of State)		
mber of Corporation (if kn	nown)		
tutes, this Florida Not For	r Profit Corporation ad	opts the fe	ollowing
ration:			
			The new
oration" or "incorporated	" or the abbreviation "	Corp." oi	" "Inc. "
CC.)			
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office address in Florida,	enter the name of the	- 	03
e address:		i Gr	8
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	,	- [○11	<u></u>
(Fle	orida street address)		
		3:-	ယ
	Florida		
(City)	(Zip C	ode)	
red Agent: a familiar with and accept	the obligations of the pe	osition.	
Cincolana of Vana Daniel	and local if above in		
	mber of Corporation (if kritutes, this Florida Not Fortation: pration: oration" or "incorporated of the second o	mber of Corporation (if known) tutes, this Florida Not For Profit Corporation advantation: pration: Oration" or "incorporated" or the abbreviation " SSS) Office address in Florida, enter the name of the see address: (Florida street address) (Florida street address) Florida (City) red Agent:	mber of Corporation (if known) tutes, this Florida Not For Profit Corporation adopts the formation: pration: pration" or "incorporated" or the abbreviation "Corp." on the address in Florida, enter the name of the tee address: (Florida street address) Florida (City) (Zip Code) red Agent: of familiar with and accept the obligations of the position.

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 X Remove X Add	<u>V</u> <u>Mi</u>	nn <u>Doe</u> ke Jones l <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PTD	DONATI, WILLIAM C	1605 RIDGE TOP DRIVE
Add			TARPON SPRINGS FL 34688
X. Remove			
2) Change	PTD	WEISSMAN, LAWRENCE	7422 SOUTHHAMPTON RD
Add			SPRING HILL FL 34606
X Remove			
3) Change	TD	BOYCE, LAWRENCE	3330 S E 20TH LANE
Add			SUMTERVILLE FL 33585
X Remove			
4) X Change	TD	MILANO, FRANK	PO BOX 5348
Add			SPRING HILL FL. 34611
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

ttach additional sheets.	if necessary).	(Be specific)					
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The date of each amendment(s) adoption:	, if other than the
fate this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filling document's effective date on the Department of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of vot was/were sufficient for approval.	tes cast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The adopted by the board of directors.	he amendment(s) was/were
Dated 12/14/2017	
Signature	
(By the chairman of vice chairman of the board, president have not been selected, by an incorporator – if in the han other court appointed fiduciary by that fiduciary)	
SMITHSON, JERRY	
(Typed or printed name of per	rson signing)
PRESIDENT	
(Title of person sig	gning)