## N01000001356

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT.	MAIL
(Bı	siness Entity Name	e)
(Do	ocument Number)	-
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
corp		
1		

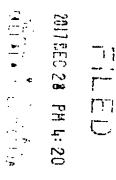




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11/17/17--01031--008 \*\*25.00

12/28/17--01018--008 \*\*10.00



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## COVER LETTER

Division of Corporations Trinity PPAL INC. NAME OF CORPORATION: N07000001356 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Karl Crawford (Name of Contact Person) Trinity PPAL INC. (Firm/Company) 3152 Little Rd. #175 (Address) Trinity, Florida 34655 (City/ State and Zip Code) trinitymustangs2007@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 3262677 Karl Crawford (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) **Street Address** Mailing Address Amendment Section Amendment Section

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

TO: Amendment Section

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



December 8, 2017

KARL CRAWFORD TRINITY PPAL INC 3152 LITTLE RD #175 TRINITY, FL 34655

SUBJECT: TRINITY PPAL INC. Ref. Number: N07000001356

We have received your document for TRINITY PPAL INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 917A00024889



November 22, 2017

KARL CRAWFORD TRINITY PPAL INC. 3152 LITTLE RD #175 TRINITY, FL 34655

SUBJECT: TRINITY PPAL INC. Ref. Number: N07000001356

We have received your document for TRINITY PPAL INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The fee to file your document is \$35.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 917A00023697

## Articles of Amendment to Articles of Incorporation of

Trinity PPAL INC.						
(Name of Corporation	as current	ly filed with the Flo	orida Dept. of State)			
N07000001356						
(Docur	nent Numbe	er of Corporation (if	known)			
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not F</i>	or Profit Corporation :	idopts the	e followi	ing
A. If amending name, enter the new name of the	e corporati	on:				
Trinity Mustangs INC.					The nu	ew
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporate	ed" or the abbreviation	"Corp."		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3152 Little Rd. #17	5			
		Trinity, Fl 34655				
						_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				્ય •• દુધ	73	
		<del></del>		and id.	=	
				Pr.	(7)	
				· , u	6 <del>3</del>	_; 
D. If amending the registered agent and/or regi			, enter the name of th	<u>e</u> _	7	
new registered agent and/or the new register			مدر	կ։ 2ն	_	
Name of New Registered Agent:	Joe Glennon					_
	3152 Little Rd. #175					
N. Destruction of Office Address		(1	Florida street address)			
<u>New Registered Office Address:</u> Trinity				34655		
		((':1\)	, Florid	a	·	
		(City)	(Дір	Code)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager			of the obligations of the	position.		
<del>-</del>	<del></del>	anature of New Real	stered Agent if changing	10		

## 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	<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
I) Change	VP	Rob Green	3152 Little Rd. #175
X Add			Trinity, Florida 34655
Remove			
2) Change	S	Melissa McDuffy	3152 Little Rd. #175
X Add			Trinity, Fl 34655
Remove			
3) Change	<u>C</u>	Joe Glennon	3152 Little Rd. #175
X Add			Trinity, Fl 34655
Remove			
4) Change	D	Karl Crawford	3152 Little Rd. #175
X Add			Trinity, Fl 34655
Remove			
5) Change	<u>T</u>	Heather Hubbard	3152 Little Rd. #175
Add			Trinity, Fl 34655
X Remove			<del></del>
6) Change	D	Jeff Copeland	3152 Little Rd. #175
Add			Trinity, Fl 34655
X Remove			

If amending the Officers and/or Directors, enter the title and hame 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	AD	Ian Wilson	3152 Little Rd. #175
Add			Trinity, Florida 34655
X Remove			
2) Change	<u>s</u>	Kim Ruffin	3152 Little Rd. #175
Add			Trinity, FI 34655
X Remove			
3) Change	<u> </u>	Heather Hubbard	3152 Little Rd. #175
Add			Trinity, Fl 34655
X Remove			
4) Change			
<b>A</b> dd			
Remove			
5) Change	<del></del>		
Add			
Remove			<del></del>
6) Change		<u> </u>	
Add			
Remove			

(attach additional sheets, if necesso	ary). (Be specific)			
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	ber 5, 2017	
The date of each amendment(s) adoption:		_, if other than the
date this document was signed.		
Effective date if applicable:		<del></del>
(no more	than 90 days after amendment file date)	
Note: If the date inserted in this block does not mee document's effective date on the Department of State	t the applicable statutory filing requirements, this date will not be seconds.	e listed as the
Adoption of Amendment(s) (CHECH	(ONE)	
The amendment(s) was/were adopted by the me was/were sufficient for approval.	mbers and the number of votes cast for the amendment(s)	
There are no members or members entitled to veradopted by the board of directors.	ote on the amendment(s). The amendment(s) was/were	
Dated 12/05/17	<del></del>	
Signature (By the chairman or vice chair	rman of the board, president or other officer-if directors	_
	n incorporator - if in the hands of a receiver, trustee, or	
Karl Crawford		
(*	Typed or printed name of person signing)	
Director		
	(Title of person signing)	