N12000010798

(Re	questor's Name)	
(Ade	dress)	
(Add	dress)	
•	•	
(Cit	y/State/Zip/Phone	-
(Cit	y/State/Zip/Pnon	e #)
PICK-I IP	☐ WAIT	☐ MAIL
L] Flore-of	L *****	
(Bu:	siness Entity Nar	me)
(Do	cument Number)	<u> </u>
Certified Copies	Certificate	s of Status
Special Instructions to I	Filing Officer:	
J DENNIS		
		_
	JAN	3 1 2023
R 12/20/22	. 	

Office Use Only



300392605563

08/16/22+-01087--007 **35.00

2022 AUG 16 AM 11:47

FILED SECRETARY OF STATE OF CORTOR VILOS

<u>COVER LETTER</u>
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: PROSECT THUEN & FYC.
DOCUMENT NUMBER: N 12 0000 10 798
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
WILLIAM WERNER (Name of Contact Person)
(Name of Contact Person)
PROJECT PHOENIX INC
(Firm/ Company)
36 W. DEPROSEN St
(Address)
E HG(EUXX)P FL 34323 (City/ State and Zip Code)
(City/ State and Zip Code)
DRUJECT DA DENIX ENGLESSED DIA AOD. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 9/1 - 286 - 0733 (Area Code) (Daytime Telephone Number)
(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:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) S43.75 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

Articles of Amendment to Articles of Incorporation of

N12A	00010798	
(Name of Cornoration as currently filed with the F	lorida Dept. of State)	
PROJECT SHOENLY	FAC .	
PROSECT PHOENIX . C. (Documen	t Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "company" or "Co." may not be used in the name.	corporation" or "incorporated	I" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	•	
(Principal office address MUST BE A STREET ADL		
		, <u>, , , , , , , , , , , , , , , , , , </u>
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
	41 4 - 4 - 4 - 4	
D. If amending the registered agent and/or register	red office address in Florida.	enter the name of the
new registered agent and/or the new registered		The same of the
Name of New Registered Agent:		
<u>New Registered Office Address:</u>	<i>0</i> 71	orida street address)
<u>_</u>		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		the obligations of the position.
	Signature of New Regist	ered Agent, if changing

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	PT John f. Y Mike J SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>y F</u>	KAKER BACKER	234 COUNTY PCD 141 TISTOMINGO MS 38813
≰ Remove			
2) Change Add		1.2	
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addit (attach additional shee	ng additional Art ets. (f necessary).	ticles, enter change(s) here: (Be specific)	
	···		<u> </u>
		40	

	-
	 _
	<u></u>
The date of each amendment(s) adoption: $13-14-32$ date this document was signed.	, if other than the
Effective date if applicable: 13-14-27 (no more than 90 days after amendment file date)	
(no more man 90 days after amenament fite date)	

<u>Note:</u> 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.

(CHECK ONE)

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 12/14/22
Signature Utter Up
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
WILLIAM WERNER
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)