N130000000

(Re	equestor's Name)	
(Ad	idress)	·
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	The Vocation Depo	t		
DOCUMENT NUMBER:	N13000001900			
The enclosed Articles of Am	endment and fee are sub	nitted for filing.		
Please return all corresponde	nce concerning this matte	er to the following:		
Cheryl Vincent				
		(Name of Contact P	erson)	
The Vocation Depot				
		(Firm/ Compan	y)	
4708 Cypress Serenity Drive	e			
		(Address)		
Plant City, FL 33565				
		(City/ State and Zip	Code)	
cvincent@vocationdepot.org	3			
T.	-mail address: (to be used	for future annual re	port notification	1)
For further information conc	erning this matter, please	call:		
Cheryl Vincent		at	813	951-7142
	(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fe	ollowing amount made pa	yable to the Florida	Department of	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Certifi	D Filing Fee icate of Status led Copy tional Copy is (sed)

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

Articles of Amendment to Articles of Incorporation of

The Vocation Depot Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
N13000001900
(Document Number of Corporation (it known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent: Kevin Vincent
New Registered Office Address: 1708 Cypress Sevenity Drive (Florida street address)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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 I V Mike SV Sally	Jones .	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	CEO	Farinella, Frank A. Jr	2076 Seawind Ct Indialantic, FL32903
X Remove 2) X Change Add	P	Vincent, Kevin L	4708 Cypress Serenity Drive Plant City, FL 33565
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or add (attach additional she		ticles, enter change(s) here: (Be specific)	

		
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The date of each amendment	(s) adoption:	if other than the
date this document was signed.		
Effective date if applicable:	May 13, 2024	
- 	(no more than 90 days after amendment file date,	
	is block does not meet the applicable statutory filing requirer are Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wwws/were sufficient for ap	ere adopted by the members and the number of votes cast for proval.	r the amendment(s)

Signature (By the chairman or v/ce chairman of the board, president or other officer have not been selected, by an incorporator – if in the hands of a receiver other court appointed fiduciary by that fiduciary) Kevin Vincent (Typed or printed name of person signing)	
(By the chairman or vec chairman of the board, president or other officer have not been selected, by an incorporator – if in the hands of a receiver other court appointed fiduciary by that fiduciary) Kevin Vincent	
have not been selected, by an incorporator – if in the hands of a receiver other court appointed fiduciary by that fiduciary) Kevin Vincent	
	iver, trustee, or
(Typed or printed name of person signing)	
)
President	