N16000008322

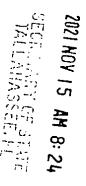
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
opeoid/ instructions to 1 liming different

Office Use Only



600376434796

11/15/21--01008--023 **35.00



C. BRUMBLEY
DEC - 8 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	pel Rip City, Inc		
DOCUMENT NUMBER:	08322		
The enclosed Articles of Amendment	····	na	
The Cherosed Afficies of Amenament	and rec are submitted for the	ng.	
Please return all correspondence conc	erning this matter to the follo	owing:	
Erik Ravenna			
	(Name of C	ontact Person)	
Chapel Rip City, Inc			
	(Firm/ C	Company)	
25115 Tradewinds Dr.			
	(Ad	dress)	
Land O' Lakes, FL 34639			
	(City/ State	and Zip Code)	
Chapelripcity@gmail.com			
E-mail add	ress: (to be used for future a	nnual report notification	on)
For further information concerning th	s matter, please call:		
Erik Ravenna		813 at	624-7112
(Name of	Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following	amount made payable to the	Florida Department o	f State:
\$35 Filing Fee □\$43.75 Certif	S Filing Fee & S43.75 Filing Fee & Certified (Addition enclosed)	Copy Certical copy is Certical (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)

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

Chapel Rip City, Inc	Done of State)			
Name of Corporation as currently filed with the Florida N16000008322	(Dept. of State)			
(Document Nun	ber of Corporation	ı (if known)		
Pursuant to the provisions of section 617.1006. Florida Statuamendment(s) to its Articles of Incorporation:				
A. If amending name, enter the new name of the corpor	ation:			
name must be distinguishable and contain the word "corpor" "Company" or "Co." may not be used in the name.	ration" or "incorp	orated" or the abbreviation "Corp.	The new	
B. Enter new principal office address, if applicable:			_ `	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>S</u>)	\$E	15	
		\$55 \$55		
			<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			8: 54 C	
(Making data as MAY DE ATOST OFFICE BOX)	 			
				
D. If any and in the second of the second of	98 a .l	. Ida a da		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		orida, enter the name of the		
				
Name of New Registered Agent:				
	<u></u>			
New Registered Office Address:		(Florida street address)		
		, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am j		occépt the obligations of the position.		
	Signature of New 1	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 D V Mike John SV SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	VP	Colin R Bolinger	3024 21st St N St. Petersburg, FL 33713
X Remove 2) Change X Add	VP	Jennifer Northey	3118 Castle Rock Circle Land O' Lakes, FL 34639
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or addin (attach additional shee	g additional Art ts, if necessary).	icles, enter change(s) here: (Be specific)	
		-	

				
	 			
			<u> </u>	
	<u> </u>			
	· · ·			
				
The date of each amendment(date this document was signed.	s) adoption:			, if other than the
Effective date if applicable:	11-01-2021			
	(no more than 90 d	lays after amendment file	date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the apple e Department of State's record	licable statutory filing req ds.	quirements, this date will no	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/we was/were sufficient for app	re adopted by the members ar proval.	nd the number of votes ca	st for the amendment(s)	

There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/we ard of directors.
	10-4-2021
Dated	
Signature	
	(By the chairman'or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee,
	other court appointed fiduciary by that fiduciary)
	Erik Ravenna ERIK RAUENNA
	(Typed or printed name of person signing)
	President TROSIOINT
	(Title of person signing)