N17000004603

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COVER LETTER

TO: Amendment Section Division of Corporations

Puzzle Pied NAME OF CORPORATION:	ees of North Florida, Inc.
N17000004603	
The enclosed Articles of Amendment and fe	re are submitted for filing.
Please return all correspondence concerning	this matter to the following:
David W Martin	
	(Name of Contact Person)
Martin CPA & Company LLC	
	(Firm/ Company)
882 SW Baya Drive	
- · · · · · · · · · · · · · · · · · · ·	(Address)
Lake City, FL 32025	
	(City/ State and Zip Code)
dmartin@martinepacompany.com	
E-mail address: (to be used for future annual report notification)
For further information concerning this matt	er, please call:
David W Martin	386-361-5939 at
(Name of Conta	et Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amour	nt made payable to the Florida Department of State:
\$35 Filing Fee	g Fee & S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Stront 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

Puzzlee Pieces of North Florida Inc.

2.000 21 700 2: 54

Puzzlee Pieces of North Florida, Inc	,
Name of Corporation as currently filed with the Florida	Dept. of State)
N17000004603	- -
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corporation</i> adopts the follo
A. If amending name, enter the new name of the corporate	ion:
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name	The tion" or "incorporated" or the abbreviation "Corp." or "In
B. Enter new principal office address, if applicable:	1572 SE High Falls Rd
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Lake City, FL 32025
C. Enter new mailing address, if applicable:	1572 SE High Falls Rd
(Mailing address <u>MAY BE A POST OFFICE BOX)</u>	Lake City, FL 32025
D. If amending the registered agent and/or registered offi	ce address in Florida, enter the name of the
new registered agent and/or the new registered office a	ddress:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept the obligations of the position.
Si	gnature 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 De V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add	<u>P/D</u>	Tabatha Feagle	P.O. Box 534 White Springs, FL 32096
* Remove			Brooke Bedenbaugh
2) Change Add	VP/D	Terri Bedenbaugh Prescott	153 Asheville Wav Lake City, FL 32024
x Remove 3) Change Add	<u>S/D</u>		Joy Galler
Add × Remove			Terri Bedenbaugh
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
	g additional Artic	cles, enter change(s) here; (Be specific)	
	.		
			78.00

		
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-		
		
	Jun. 27, 2020	
The date of each amendment(s) adopt date this document was signed.	tion:	if other than the
Effective date if applicable: June 27.	. 2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not tment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt was/were sufficient for approval.	ted by the members and the number of votes east for the amendment(s)	

Dated	June 27, 2020
Signature _	Salatha Feagle
(I	By the chairman or vice chairman of the board, president or other officer-if directors
ŀ	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or
	other court appointed fiduciary by that fiduciary)
	other court appointed fiduciary by that fiduciary)
	other court appointed fiduciary by that fiduciary) Tabatha Fengle
	other court appointed fiduciary by that fiduciary) Tabatha Fengle

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were