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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: Spectrum Thrift Store Inc
DOCUMENT NUMBER: _N17000007285
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Juliya Moody
(Name of Contact Person)
Bookkeeping & Accounting of Florida
(Firm/ Company)
9905 Old Saint Augustine Road, Unit 501
(Address)
Jacksonville, Florida 32257
(City, state and Zip Code)
jmoody@banda-cpa.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Juliya Moody  at (904) 333-1041  (Name of Contact Person)  (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:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) ☐ \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) ☐ \$643.75 Filing Fee &
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Spectrum Ihritt Store Inc		
(Name of Corporation as currently filed with the Florida	Dept. of State)	
N17000007285		
(Document Num	ber of Corporation (if kno-	wn)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For I</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ition:	
N/A		The new
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ation" or "incorporated"	or the abbreviation "Corp." or "Inc."
	$\lambda l/A$	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	77//	
Trincipal office address wood bb no reservices	: /	· · · · · · · · · · · · · · · · · · ·
		120
C. Enter new mailing address, if applicable:	NI/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	10//1	<u> </u>
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		m w
D. If amending the registered agent and/or registered of		nter the name of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:	1/A	
	(Flori	da street address)
New Registered Office Address:	11.	
	N/A	, Florida N/A (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am for	d Agent; amiliar with and accept th	e obligations of the position.
	N/A	
	Signature of New Register	ed Agent, if changing

P = President; V = Vice	s, if necessary) irector title by the President; T= Tred = Chief Financial	first letter of the office title: asurer; S= Secretary; D= Director; TR= Tr Officer. If an officer/director holds more th			
	aves the corporation	nanner. Currently John Doe is listed as the on, Sally Smith is named the V and S. These . SV as an Add.		s John Doe, <u>P</u> T as a Chi	
Example: X Change X Remove X Add	PT         John D           V         Mike J           SV         Sally S	ones		DZI OCT -5 PM	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	F 5 13	フ
i)Change Se	cretary	Marcus Sowcik		erton Ave Florida 32259	
Remove			····,= - <del>-</del>		
2) Change Add		<del></del>			
Remove 3) Remove 4dd Remove	<del></del>				
4) Change Add			<del></del>		
Remove					
5) Change Add	<del></del>				
Remove			<del> </del>	***	
6) Change Add					
Remove					
E. If amending or additional she		icles, enter change(s) here: (Be specific)			
	<b>U</b> .,	he Corporation can have us all be known as the B		rectors and rectors.	
Section 2 Au		Erase 2 future position		e set acido	

for an accountant and an attorney.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name,

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The date of each amendment(s) ad	loption:			_, if other than the
date this document was signed.	/ /-			
Effective date if applicable:	09/30/2020			
	(no more than 90 days	after amendment file d	late)	

<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.

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 09/30/2020
SignatureMark Jilman
(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)
Mark Tillman
(Typed or printed name of person signing)
President
(Title of person signing)

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