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## COVER LETTER

TO: Amendment Section
Division of Corporations

Palatka Young Prof	essionals, Inc	<u> </u>		
N18000007349	•			
DOCUMENT NUMBER:		-		
The enclosed Articles of Amendment and fee are subn	nitted for filing.			
Please return all correspondence concerning this matte	r to the following:			
Charles B Bates III				
	(Name of Contact Perso	n)		
Palatka Young Professionals				
· · · · · · · · · · · · · · · · · · ·	(Firm <sup>/</sup> Company)			
3400 crill ave ste 2				
	(Address)			
palatka, fl 32177				
	(City/ State and Zip Cod	le)	<del></del>	
benjie@bates-hewett.com				
E-mail address: (to be used	for future annual report	notification	1)	
For further information concerning this matter, please of	call:			
charles "benjie" bates	38 at	16	328-1100	
(Name of Contact Person)		rea Code)	(Daytime Telephone Number	er)
Enclosed is a check for the following amount made pay	vable to the Florida Dep	artment of	State:	
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Street Address				
Amendment Section	Amendment Section			

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, F1, 32301

(Name of Corporation as currently filed with the Florida Dept. of States CRETARY OF STATE ALL AHASSEE. FL  (Document Number of Corporation (if known)  assuant to the provisions of section 617.1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following nendment(s) to its Articles of Incorporation:  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."			19 may 1 g
Company of Corporation as currently filed with the Florida Dept. of State CRE IARY OF STATE		to Articles of Incorporation	FILED
unsuant to the provisions of section 617.1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following mendment(s) to its Articles of Incorporation:  If amending name, enter the new name of the corporation:  The new one 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.  Enter new principal office address, if applicable:  Trincipal office address MUST BE A STREET ADDRESS )  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address:  Name of New Registered Agent:  New Registered Agent:  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  ew Registered Agent's Signature, if changing Registered Agent:		currently filed with the Flori	TATE OF STAT
Is amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  The new ione 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.  Enter new principal office address, if applicable: trincipal office address MUST BE A STREET ADDRESS )  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address:  Name of New Registered Agent:  New Registered Agent:    Florida   Florida	N 1860 C	Number of Corneration Gifts	TEMPASSEE.FL
The new time 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.  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS )  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address:  Name of New Registered Agent:  New Registered Agent:  (City)  (Cit	ursuant to the provisions of section 617,1006. Florida		
The new time 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.  Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS }  Enter new mailing address, if applicable: (Mailing address in Florida, enter the name of the new 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:  New Registered Office Address:  (City) (Zip Code)  ew Registered Agent's Signature, if changing Registered Agent:	nendment(s) to its Articles of Incorporation:		
time 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.  Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS    Enter new mailing address MUST BE A STREET ADDRESS    Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:    New Registered Office Address:	. If amending name, enter the new name of the co	rporation:	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  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:  New Registered Office Address:  (City)  (Zip Code)  ew Registered Agent's Signature, if changing Registered Agent:	ame must be distinguishable and contain the word "c Company" or "Co," may not be used in the name.	orporation" or "incorporated	
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Name of New Registered Agent:    New Registered Office Address:   (Florida street address)		<u></u>	
New Registered Office Address:	new registered agent and/or the new registered		enter the name of the
, Florida, Florida, City) (Zip Code)  ew Registered Agent's Signature, if changing Registered Agent:	_	(Flo	rida street address)
(City) (Zip Code)  ew Registered Agent's Signature, if changing Registered Agent:	<u>New Registered Office Address:</u>		
ew Registered Agent's Signature, if changing Registered Agent:		(Cino	
		(Cii)	(гір Сойс)
			de la della continua della constitui

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. Trustec; 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	<u>V</u> <u>Mi</u>	<u>in Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change	D	Victoria McColm	320 St. Johns Ave Ste 103
Add			Palatka, FI 32177
x Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del> _		
Remove			

famending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
-	
	<del></del>
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•	9/18/	18			
The date of each amendment(s) date this document was signed.	adoption:				, if other than the
Effective date <u>if applicable</u> :					
	(no more	e than 90 days after	amendment file de	મંછ	
Note: If the date inserted in this I document's effective date on the I			utory tiling requi	rements, this date will	not be listed as the
Adoption of Amendment(s)	(CHEC	CK ONE)			
■ The amendment(s) was/were was/were sufficient for appro	• •	nembers and the num	ber of votes east f	for the amendment(s)	
There are no members or me adopted by the board of dire		vote on the amendm	ent(s). The amend	dment(s) was/were	
9/18/18 Dated			_		
o.	ep	13.1	17)		
Signature(By the ch	airman or vice ch	nairman of the board.	president or other	officer-if directors	
	•	an incorporator—if ciary by that fiduciary		eceiver, trustee, or	
		Thortes.	B.	Bols	[[
		(Typed or printed na			
	$\mathcal{O}$	liech			
	•	(Title of	person signing)		