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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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I ALBRITTOM

COVER LETTER

TO: Amendment Section Division of Corporations Central Florida 5's. Inc N1900008335 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Noah Piard
(Name of Contact Person) entral Florida 575, Inc. 610 Zinnia Drive Casselberry FL 32707 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (Area Code) (Daytime Telephone Number) Noah Piard Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy is

Enclosed)



October 15, 2019

NOAH PIARD 610 ZINNIA DRIVE CASSELBERRY, FL 32707

SUBJECT: CENTRAL FLORIDA 5S, INC.

Ref. Number: N19000008335

We have received your document for CENTRAL FLORIDA 5S, INC., however, upon receipt of your document no check was enclosed. Please return your document along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 619A00021252

Articles of Amendment

•	to
Articles	of Incorporation
	o f-
Central F	Florida 5's, Inc.
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
1119000	a08335
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
	The new
	ion" 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)	
	, co-
C. Catan name welling address if annihus block	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	•
Mading duaress MAT DE A TOST OF FICE DOA	11
	<u></u>
D. If amending the registered agent and/or registered office	
new registered agent and/or the new registered office a	adress:
Name of New Registered Agent:	Noah Yiard
Pane of the regularies right.	610 Zinnia Drive

New Registered Office 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 De V Mike Je SV Sally Se	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)	PDCEO	Nooh Piard	610 Zinnia Drive Casselberry, F-L 32707
2) Change Add Remove	<u>D</u> _	Scott A. Livingston	150 Beat Springs Drive Winter Springs, FL 32708
3) Change Add Remove	D	Todd Walker	1230 North Street Longwood, FL 32750
4) Change Add Remove		Alicia M. Goodsin	610 Zinnia Once Casselberry, FL 32707
5) Change Add Remove	D	Terry Piard	3870 Bryston Drive Orkado, FL 32022
6) Change Add	<u>D</u>	Glady's Dorcely	850 Commonwealth (+. Casselberry, FL 37707
Remove		Page 2 of 4	

The date of each amendment(s) adoption late this document was signed.	m. August 8th, 2019	if other than the
Effective date <u>if applicable</u> :	September 19th 2019 (no more than 90) days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	pes not meet the applicable statutory filing requirements, this date will nent of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
☐ There are no members or members e adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated Sept	en & 19, 2019	
Signature		
(By the chairman of have not been sel	or vice chairman of the board, president or other officer-if directors lected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Title of person signing)	