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COVER LETTER

TO: Amendment Section Division of Corporations

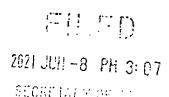
NAME OF CORPORATION: Support A Troop Donations Inc.
DOCUMENT NUMBER: N1900011839
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Billy Sanders (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
212 Sawdust Trl. (Address) NicholSon 6A, 30565 (City/ State and Zip Code)
(Address)
NicholSon 6A, 30565
(City/ State and Zip Code)
BSanders 9230 FCloud. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
$\frac{ S_{\cdot} /y}{ S_{\cdot} /y} = \frac{ S_{\cdot} /y}{ S_$
(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 & Certificate of Status Certificate of Status (Additional copy is enclosed) □ \$43.75 Filing Fee & Certificate of Status (Additional Copy is Enclosed)

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



(Name of Corporation as currently filed with the	e Florida Dept. of State)		THE ATTACK
Support A troop	Donations	Inc	
	nent Number of Corporation		
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida N</i> o	ot For Profit C	Corporation adopts the following
A. If amending name, enter the new name of the	e corporation:		
iSupport Deploy name must be distinguishable and contain the word	ed troops	Inc.	The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	l "corporation" or "incorpo E	rated" or the a	ibbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BQX</u>)		
D. If amending the registered agent and/or regis		rida, enter the	name of the
new registered agent and/or the new register	ed office address:		
Name of New Registered Agent:			
Nov. Paristered Office (dd.		(Florida street d	address)
New Registered Office Address:			
			, Florida
	(City)		, Florida (Zip Code)
New Registered Agent's Signature, if changing Research hereby accept the appointment as registered agent		cept the obliga	tions of the position.
_	Signature of New Re	egistered Agen	t. 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	V Mik	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	5/D	Gootich, Abreama violet	21520 Compbell Dr. Brooksville, FL 34401
Remove 2) Change Add	<u>T10</u>	Dutkiewicz, Brandon	8292 Cofied Ln Spring Hill, FL 34608
X Remove Change Add	TD	Rust, Timothy	3155 Osprey Dr green was Ark
Remove 4) Change Add	S/D	Casallas, Tim	61-55 98th st. Apt # ST.C. Bego Park, NY
Remove			11374
5) Change Add		· · · · · · · · · · · · · · · · · · ·	
Remove			
6) Change Add			
Remove			· · · · · · · · · · · · · · · · · · ·
E. If amending or additional sheet		Articles, enter change(s) here: (Be specific)	
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		J-1111	
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The date of each amendment(s) adoption:			, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :	05/25/2021		
(nective date it applicable.	05/25/2021 o more than 90 days after amendment	file date)	
Note: If the date inserted in this block does			ne listed as the

document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were coard of directors.
Dated	05/25/2021
Signatu	
	(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)
	Billy Sanders
	(Typed or printed name of person signing)
	President (Title of person signing)