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COVER LETTER

TO: Amendment Section Division of Corporations	
Florida Consumer	Alliance, Inc.
N19000011877 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	ibmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Stephen H Thomas	
	(Name of Contact Person)
	(Firm/ Company)
2910 Kerry Forest Parkway, D4 #375	
	(Address)
Tallahassee, FL 32309	
	(City/ State and Zip Code)
sthomas@tlclaw.net	
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, plea	ise call:
Stephen H Thomas	850 792-4936 at
(Name of Contact Perso	
Enclosed is a check for the following amount made	payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	
<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<u>Street Address</u> 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

Florida Consumer Alliance, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N19000011877

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(Document Number of Corporation (if known)

Pursuant to the provisions of section 617,1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

	The newThe newTte new _Tte new _Tte newTte newTte new _Tte newTte newTte new _Tte new _
l	name 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.
	5367 Carisbrooke Lane

B. Enter new principal office address, if applicable:	3007 Carlsof Core Faile	<u>ن</u> ،	\sim	
 (Principal office address <u>MUST BE A STREET ADDRES</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>) 	Tallahassee, FL 32309		021 A	
			9 I 9N	
	2910 Kerry Forest Parkway, D4 #375	Chers Chers Philip Philip	PH	m
	Tallahassee, FL 32309			Ĵ
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D. 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:	Stephen H Thomas	·
	5367 Carisbrooke Lane	
	(Floria	la street address)
<u>New Registered Office Address:</u>		
	Tallahassee	, Florida 32309
	(City)	(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> *Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.*

Signature of New Registered Jgem. 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John D</u> V <u>Mike J</u> SV <u>Sally S</u>	ones	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
3) Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add		·	
Remove			
6) Change Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption:		, if other than the
Effective date <u>if applicable</u> :		
ino more than	90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the locument's effective date on the Department of State's re-	applicable statutory filing requirements, this cords.	date will not be listed as the

Adoption of Amendment(s)

(<u>CHECK ONE</u>)

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

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

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08/04/2021 Dated

Signature

(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)

Brett Tillotson

(Typed or printed name of person signing)

President

(Title of person signing)

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