N19004

(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations Sun Country Trail Blazers Inc. NAME OF CORPORATION: N19004 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Karen Kraushaar (Name of Contact Person) President, Sun Country Trail Blazers (Firm/ Company) P. O. Box 773034 (Address) Ocala, FL 34477 (City/ State and Zip Code) kktrailrider@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Karen Kraushaar 301 467-6433 (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 & \$\frac{1}{2}\$43.75 Filing Fee & **≥**\$52.50 Filing Fee Certificate of Status / Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation of

2020 NOV 12 PM 1: 35

SECRETARY OF STATE TABLE IN SEFF. FU

Sun Country Trail Blazers Inc.

Name of Corporation as currently filed with th	<u>ie Florida Dep</u>	ot, of State)	
N19004			
(Docum	ment Number o	of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes,	this <i>Florida Not F</i>	for Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation	<u>ı:</u>	
N/A			The new
name must he distinguishable and contain the word "Company" or "Co." may not he used in the nam		n" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica		//A	
Principal office address MUST BE A STREET A			
	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	l/A	
D. If amending the registered agent and/or regi	istored office	address in Florid	a enter the name of the
new registered agent and/or the new register			a, enter the hame of the
Name of New Registered Agent:	N/A		
	N/A		
New Registered Office Address:		(1	Florida street address)
New Registered Office Than Case.	N/A		
		(City)	, Florida (Zip Code)
Now Desistance Amonths Commenters if the control	Danistan 4 - 4 -		·
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			t the obligations of the position.
-		()! 5 :	
	Signo	ature of New Regis	tered 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 V John Do Mike Jo SV SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) × Change Add	VP	June Empfield	8211 SW52nd Ct Ocala, FL 34476
Remove			
2) Change Add	<u>Dir/Trea</u>	Pat Nicholls	1995 SW 97th St Ocala, FL 34476
x Remove 3) Change x Add Remove	Treas	Mary McGinnis	75 Lake View Dr., East Ocala,FL 34482
4) Change Add	Dir	Denise Ravmond	6500 NW 50th Ave Ocala, FL 34482
x Remove			
5) Change Add	Secretar	Lori Lewis	15801 NW 112 Place Road Morriston, FL 32668
x Remove			
6) Change Add	Secretar	Denise Sistarelli	2740 SE 80th St Ocala FL 34480
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

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The date of each amendmen date this document was signed	t(s) adoption: i.				, if other than the
Effective date if applicable:	immediately				
mappicable.	(no more th	han 90 days after am	endment file date)		- :
Note: If the date inserted in the document's effective date on the	his block does not meet the Department of State	the applicable statute 's records.	ory filing requiremen	ts. this date will not	be listed as the

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

(CHECK ONE)

Adoption of Amendment(s)

D . 1	November 7, 2020
Dated	
Signatur	(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)
	Karen Kraushaar
	(Typed or printed name of person signing)

(Title of person signing)