## N23000003219

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	
N23000003219 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and tee are submitted for filing.	· ·
Please return all correspondence concerning this matter to the following:	
Dr Frederick J Herzog, PhD	
(Name of Contact Person)	
Dr Frederick J Herzog, PhD LLC	
(Firm/ Company)	
368 W Cobblestone Loop	
(Address)	
Hernando, FL 3 4442	
(City/ State and Zip Code)	
fherzog@tampabay.rr.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	2023 Joi 5: Chi: 7/11
Dr Frederick J Herzog 847 899 9000 9am-4pm	ـــــــــــــــــــــــــــــــــــــ
(Name of Contact Person) (Area Code) (Daytime Telepho	one 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 & ☐ \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) ☐ \$60 Filing Fee & ☐ \$60 Filing	17/TE

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

Business Center For Citrus County, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N23000003219 (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: 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. 203 E. Dampier St B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) Inverness, FL 34450 C. Enter new mailing address, if applicable: 203 E. Dampier St. (Mailing address MAY BE A POST OFFICE BOX) Inverness, FL 34450 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: (Florida street address) New Registered Office Address: n/a Florida (Zip Code) (City) 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 A Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) × Change Add	VP	Don Tayor	1 Nicotiana Homosassa 34446
Remove			
2) × Change Add	Ţ	Ardath Prendergast	6083 W. Fairhope Crystal River, FL 34429
Remove 3 ) Remove 4 Add Remove	<del></del> -		77.72 J
4) Change Add	•		
Remove  5) Change Add		<del>-</del>	76 7
Remove 6) Change Add			
Remove  E. If amending or addi	ng additi	onal Articles, enter change(s) here:	
(attach additional she	ets, if nec	essary). (Be specific)	

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7 10 22	
The date of each amendment(s) adoption: 7-18-23 date this document was signed.	, if other than the
7-18-73	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the am was/were sufficient for approval.	endment(s)

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)

Don Tayor

(Typed or printed name of person signing)

Vice President

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.

SECONE ! ! STATE